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# ROY F. WESTON, INC.

**REMOVAL PROGRAM QUALITY ASSURANCE  
SITE SPECIFIC- HEALTH AND SAFETY PLAN**

**PHASE II  
DOWNER'S GROVE GROUNDWATER INVESTIGATION  
DOWNERS GROVE, ILLINOIS**

**MARCH 2002**



**REMOVAL PROGRAM QUALITY ASSURANCE  
SITE SPECIFIC- HEALTH AND SAFETY PLAN**

**PHASE II  
DOWNER'S GROVE GROUNDWATER INVESTIGATION  
DOWNERS GROVE, ILLINOIS**

**MARCH 2002**

**Prepared For:**

**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
Emergency and Enforcement Response Branch  
77 West Jackson Boulevard  
Chicago, Illinois 60604**

TDD No. 0111-010  
Document Control No. 195-2D-ABOO

**Approvals:**

\_\_\_\_\_  
**Steve Faryan**  
**On-Scene Coordinator**

**Date**

  
\_\_\_\_\_  
**Om Patel** *For*  
**START Project Manager**

**Date**

# SITE HEALTH AND SAFETY PLAN (HASP)-FORM 1

Prepared by: Ben Maradkel

W.O. Number:

Date: 3/29/02

12634-001-001-0195-00

## Project Identification

**Site History:** IEPA conducted a ground water investigation in the spring of 2001. The investigation, which included several private well samples, resulted identifying chlorinated solvent compounds in the ground water. U.S. EPA conducted a ground water investigation in March 2002. The results identified TCE/PCE near facilities listed below.

Office: Chicago

Site Name: Downers Grove Site

Client: U.S. EPA

Work Location Address: Ellsworth Industrial Park  
Downers Grove, IL

## Scope of Work:

Perform a site assessment on Rexnord, Arrow Gear, Scott, Dynagear, Precision, Ames and St. Joseph Creek, which are located in Ellsworth Industrial Park, Downer's Grove, Illinois. The site assessment will include groundwater sampling (approx. 50), subsurface soil sampling (approx. 100), sediment sampling (approx. 16), installation of overburden and bedrock wells, utility clearances, marking of drilling/sampling locations and GPS activities. The HAS Soil Boring and well installation will be utilized by WESTON subcontractor. Geoprobe/MIP Boring will be utilized by IEPA. U.S. EPA will utilize GPS activities and OSC will conduct overall oversight. WESTON/START will conduct oversight, photo/written documentation, air monitoring, sampling and marking of locations.

☐ Sites visit only; site HASP not necessary. List personnel here and sign off below:

## Regulatory Status:

Site regulatory status:

CERCLA/SARA

RCRA

Other Federal Agency

☒ U.S. EPA

☐ U.S. EPA

☐ DOE

☒ State

☐ State

☐ USACE

☐ NPL Site

NRC

☐ Air Force

☒ OSHA

☐ 10 CFR 20

☐

Hazard Communication (Req'd See Attachment D)

☒ 1910

☒ 1926

☐ State

Safety Officer Manual (Required to be On-Site)

Based on the Hazard Assessment and Regulatory Status, determine the Standard HASP(s) applicable to this project. Indicate below which Standard HASP will be used and append the appropriate pages of this form along with the Standard Plan.

☐ Stack Test

☐ Air Emissions

☐ Asbestos

☐ Industrial Hygiene

☐

☐

☐

☐

☐

☐

## Review and Approval Documentation:

Reviewed by:  
SO/DSM/CHS

Ronald Bugg  
Name (Print)

[Signature]  
Signature

Date: 4/1/02

Other

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Approved by:

Project Manager

Om Patel  
Name (Print)

[Signature]  
Signature

Date: 4/1/02

## Hazard Assessment and Equipment Selection:

In accordance with WESTON's Personal Protective Equipment Program and 29 CFR 1910.132, at the site prior to personnel beginning work, the SHSC and/or the Site Manager have evaluated conditions and verified that the personal protective equipment selection outlined within this HASP is appropriate for the hazards known or expected to exist. (Refer to Safety Officer Manual Section 2, Personal Protection Program, for guidance.)

☒ SHSC

☐ Site Manager

Ben Maradkel  
Name (Print)

[Signature]  
Signature

Date 4/1/02

Project start date: 4/1/02 End date: 5/17/02	This site HASP must be reissued/reapproved for any activities conducted after:  Date: <u>09/30/02</u>	Amendment date(s) By: Ben Maradkel 1. 2. 3. 4. 5.
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## WESTON REPRESENTATIVES-FORM 2

Organization/Branch	Name/Title	Address	Telephone
Vernon Hills office	Om Patel	750 East Bunker Court Vernon Hills, IL 60061-1450	847/ 918-4051
Chicago Office	Ben Maradkel	70 West Madison Chicago, IL 60602	312/ 424-3314
Vernon Hills office	Kurt Fischer	750 East Bunker Court Vernon Hills, IL 60061-1450	847/ 918-4016

**Roles and Responsibilities:**

WESTON/START will conduct oversight, photo/written documentation, air monitoring, sampling and marking of locations.

## WESTON SUBCONTRACTORS

Organization/Branch	Name/Title	Address	Telephone
TBD			

**Roles and Responsibilities:**

Will conduct HAS soil boring and monitoring well installation.

\*Note: The Field/Site Supervisor shall be responsible for supervision of the Contractor and Lower Tier Subcontractor Personnel

## SITE-SPECIFIC HEALTH AND SAFETY PERSONNEL

The Site Health and Safety Coordinator (SHSC) for activities to be conducted at this site is: Ben Maradkel

The SHSC has total responsibility for ensuring that the provisions of this Site HASP are adequate and implemented in the field.

Changing field conditions may require decisions to be made concerning adequate protection programs. Therefore, the personnel assigned as SHSCs are experienced and meet the additional training requirements specified by OSHA in 29 CFR 1910.120.

**Qualifications:**

40-hour, 8-hour refresher, SHSC, Blood Borne, First Aid/CPR

**Designated alternates include:**

Om Patel

## HEALTH AND SAFETY EVALUATION-FORM 3

### Hazard Assessment

Background Review: ☒ Complete ☐ Partial If partial why?

### Activities Covered Under This Plan:

No.	Task/Subtask	Description	Schedule
1		Ground Water Investigation/Sampling	4/15/02
2		Soil and Sediment Investigation/Sampling	4/15/02
3		Oversight	4/15/02
4		Well Installation	4/15/02

### Types of Hazards:

1 Numbers refer to one of the following hazard evaluation forms. Complete hazard evaluation forms for each appropriate hazard class.

#### Physiochemical 1

- ☒ Flammable
- ☐ Explosive
- ☐ Corrosive
- ☒ Reactive
- ☐ O<sub>2</sub> Rich
- ☐ O<sub>2</sub> Deficient

#### Chemically Toxic 1

- ☒ Inhalation ☐ Carcinogen
- ☒ Ingestion ☐ Mutagen
- ☒ Contact ☐ Teratogen
- ☐ Absorption
- ☐ OSHA 1910.1000 Substance (Air Contaminants)
- ☐ OSHA Specific Hazard Substance Standard (Refer to following page for listing)

#### Radiation 3

- Ionizing:
  - ☐ Internal exposure
  - ☐ External exposure
- Non-ionizing:
  - ☐ UV ☐ IR
  - ☐ RF ☐ MicroW
  - ☐ Laser

#### Biological 2

- ☒ Etiological Agent
- ☒ Other (plant, insect, animal)
- ☒ Physical Hazards 4
- ☒ Construction Activities

### Source/Location of Contaminants and Hazardous Substances:

#### Directly Related to Tasks

- ☐ Air
- ☐ Other Surface
- ☒ Groundwater
- ☒ Soil
- ☐ Surface Water
- ☐ Sanitary Wastewater
- ☐ Process Wastewater
- ☒ Other Sediment

#### Indirectly Related to Tasks — Nearby Process(es) That Could Affect Team Members:

- ☐ Client Facility/WESTON Work Location
- ☐ Nearby Non-Client Facility

Describe:

- ☐ Have activities (task[s]) been coordinated with facility?

# HEALTH AND SAFETY EVALUATION-CHEMICAL HAZARDS OF CONCERN-FORM 4

☐ N/A

## Chemical Contaminants of Concern

Provide the data requested for chemical contaminants on HASP Form 25 or attach data sheets from an acceptable source such as NIOSH pocket guide, condensed chemical dictionary, ACGIH TLV booklet, etc. List chemicals and concentrations below and locate data sheets in Attachment B of this HASP.

☐ N/A

Identify hazardous materials used or on-site and attach Material Safety Data Sheets (MSDSs) for all reagent type chemicals, solutions, or other identified materials that in normal use in performing tasks related to this project could produce hazardous substances. Ensure that all subcontractors and other parties working nearby are informed of the presence of these chemicals and the location of the MSDSs. Obtain from subcontractors and other parties, lists of the hazardous materials they use or have on-site and identify location of the MSDSs here. List chemicals and quantities below and locate MSDSs in Attachment B of this HASP.

Chemical Name	Concentration (if known)	Chemical Name	Quantity
TCE	1-300 ppb (water)	Alconox	1 quart
PCE	1-50 ppb (water)	Fuel (Diesel)	5 gallons
TCE	5-250 ppm (soil/sediment)	Methanol	0.5 kg (17ds) calibration cylinder
PCE	5-250 ppm (soil/ sediment)	Isobutylene	0.5 kg (17 ds)calibration cylinder
1,2 PCE	60 ppb	Hydrogen	2 kg (for FID)
1,1,1 TCA	<10 ppb		
Toluene	<10 ppb		

## OSHA-SPECIFIC HAZARDOUS SUBSTANCES

The following substances may require specific medical, training, or monitoring based on concentration or evaluation of risk. See the appropriate citation listed under 29 CFR 1910 or 1926 for additional information.

<input type="checkbox"/> 1910.1001 Asbestos	<input type="checkbox"/> 1910.1002 Coal tar pitch volatiles	<input type="checkbox"/> 1910.1003 4-Nitrobiphenyl, etc.	<input type="checkbox"/> 1910.1004 alpha-Naphthylamine
<input type="checkbox"/> 1910.1005 [Reserved]	<input type="checkbox"/> 1910.1006 Methyl chloromethyl ether	<input type="checkbox"/> 1910.1007 3,3'-Dichlorobenzidine (and its salts)	<input type="checkbox"/> 1910.1008 bis-Chloromethyl ether
<input type="checkbox"/> 1910.1009 beta-Naphthylamine	<input type="checkbox"/> 1910.1010 Benzidine	<input type="checkbox"/> 1910.1011 4-Aminodiphenyl	<input type="checkbox"/> 1910.1012 Ethyleneimine
<input type="checkbox"/> 1910.1013 beta-Propiolactone	<input type="checkbox"/> 1910.1014 2-Acetylaminofluorene	<input type="checkbox"/> 1910.1015 4-Dimethylaminoazobenzene	<input type="checkbox"/> 1910.1016 N-Nitrosodimethylamine
<input type="checkbox"/> 1910.1017 Vinyl chloride	<input type="checkbox"/> 1910.1018 Inorganic arsenic	<input type="checkbox"/> 1910.1025 Lead (Att. FLD# 46)	<input type="checkbox"/> 1910.1027 Cadmium
<input type="checkbox"/> 1910.1028 Benzene	<input type="checkbox"/> 1910.1029 Coke oven emissions	<input type="checkbox"/> 1910.1043 Cotton dust	<input type="checkbox"/> 1910.1044 1,2-Dibromo-3-chloropropane
<input type="checkbox"/> 1910.1045 Acrylonitrile	<input type="checkbox"/> 1910.1047 Ethylene oxide	<input type="checkbox"/> 1910.1048 Formaldehyde	<input type="checkbox"/> 1910.1050 Methyleneedianiline
<input type="checkbox"/> 1910.1051 1,3 Butadiene	<input type="checkbox"/> 1910.1052 Methylene chloride		

## HEALTH AND SAFETY EVALUATION-2 BIOLOGICAL HAZARDS OF CONCERN-FORM 5

☒ **Poisonous Plants (FLD 43)**

Location/Task No(s):

Source: ☐ Known ☒ Suspect  
 Route of Exposure: ☐ Inhalation ☐ Ingestion  
☒ Contact ☐ Direct Penetration

Team Member(s) Allergic: ☐ Yes ☒ No  
 Immunization required: ☐ Yes ☒ No

☒ **Insects (FLD 43)**

Location/Task No(s):

Source: ☐ Known ☐ Suspect  
 Route of Exposure: ☐ Inhalation ☐ Ingestion  
☒ Contact ☒ Direct Penetration

Team Member(s) Allergic: ☐ Yes ☒ No  
 Immunization required: ☐ Yes ☒ No

☒ **Snakes, Reptiles (FLD 43)**

Location/Task No(s):

Source: ☐ Known ☒ Suspect  
 Route of Exposure: ☐ Inhalation ☐ Ingestion  
☒ Contact ☐ Direct Penetration

Team Member(s) Allergic: ☐ Yes ☒ No  
 Immunization required: ☐ Yes ☒ No

☒ **Animals (FLD 43)**

Location/Task No(s): Site/ All Tasks

Source: ☐ Known ☒ Suspect  
 Route of Exposure: ☐ Inhalation ☐ Ingestion  
☒ Contact ☐ Direct Penetration

Team Member(s) Allergic: ☐ Yes ☒ No  
 Immunization required: ☐ Yes ☒ No

FLD 43 — WESTON Biohazard Field Operating Procedures: Att. OP ☐

☒ **Sewage**

Location/Task No(s):

Source: ☐ Known ☒ Suspect  
 Route of Exposure: ☒ Inhalation ☒ Ingestion  
☒ Contact ☐ Direct Penetration

Team Member(s) Allergic: ☐ Yes ☒ No  
 Immunization required: ☐ Yes ☒ No

Tetanus Vaccination within Past 10 yrs: ☐ Yes ☐ No

☒ **Etiologic Agents (List)**

Location/Task No(s): Site/ All Tasks

Source: ☐ Known ☒ Suspect  
 Route of Exposure: ☐ Inhalation ☐ Ingestion  
☒ Contact ☐ Direct Penetration

Team Member(s) Allergic: ☐ Yes ☒ No  
 Immunization required: ☐ Yes ☒ No

FLD 44 — WESTON Bloodborne Pathogens Exposure Control Plan – First Aid Procedures: Att. OP ☐

FLD 45 — WESTON Bloodborne Pathogens Exposure Control Plan – Working with Infectious Waste: Att. OP ☐



## HEALTH AND SAFETY EVALUATION-4 PHYSICAL HAZARDS OF CONCERN-FORM 7

Phy. Haz. Cond.	Physical Hazard	Attach OP	WESTON OP Titles
Loud noise	Hearing loss/disruption of communication	<input checked="" type="checkbox"/>	FLD01 - Noise Protection
Inclement weather	Rain/humidity/cold/ice/snow/lightning	<input checked="" type="checkbox"/>	FLD02 - Inclement Weather
Steam heat stress	Burns/displaced oxygen/wet working surfaces	<input type="checkbox"/>	FLD03 - Hot Process - Steam
Heat stress	Burns/hot surfaces/low pressure steam	<input type="checkbox"/>	FLD04 - Hot Process - LT3
Ambient heat stress	Heat rash/cramps/exhaustion/heat stroke	<input type="checkbox"/>	FLD05 - Heat Stress Prevention/Monitoring
Cold stress	Hypothermia/frostbite	<input checked="" type="checkbox"/>	FLD06 - Cold Stress
Cold/wet	Trench/paddy/immersion foot/edema	<input checked="" type="checkbox"/>	FLD07 - Wet Feet
Confined spaces	Falls/burns/drowning/engulfment/electrocution	<input type="checkbox"/>	FLD08 - Confined Space Entry
Explosive vapors	Thermal burns/impaction/dismemberment	<input type="checkbox"/>	FLD09 - Hot Work
Improper lifting	Back strain/abdomen/arm/leg muscle/joint injury	<input checked="" type="checkbox"/>	FLD10 - Manual Lifting/Handling Heavy Objects
Uneven surfaces	Vehicle accidents/slips/trips/falls	<input checked="" type="checkbox"/>	FLD11 - Rough Terrain
Poor housekeeping	Slips/trips/falls/punctures/cuts/fires	<input checked="" type="checkbox"/>	FLD12 - Housekeeping
Structural integrity	Crushing/overhead hazards/compromised floors	<input type="checkbox"/>	FLD13 - Structural Integrity
Hostile persons	Bodily injury	<input type="checkbox"/>	FLD14 - Site Security
Remote area	Slips/trips/falls/back strain/communication	<input checked="" type="checkbox"/>	FLD15 - Remote Area
Improper cyl. handling	Mechanical injury/fire/explosion/suffocation	<input type="checkbox"/>	FLD16 - Pressure Systems - Compressed Gases
Water hazards	Poor visibility/entanglement/drowning/cold stress	<input type="checkbox"/>	FLD17 - Diving
Water hazards	Drowning/heat/cold stress/hypothermia/falls	<input type="checkbox"/>	FLD18 - Operation and Use of Boats
Water hazards	Drowning/frostbite/hypothermia/falls/electrocution	<input type="checkbox"/>	FLD19 - Working Over Water
Vehicle hazards	Struck by vehicle/collision	<input checked="" type="checkbox"/>	FLD20 - Traffic
Explosions	Explosion/fire/thermal burns	<input checked="" type="checkbox"/>	FLD21 - Explosives
Moving mechanical parts	Crushing/pinch points/overhead hazards/electrocution	<input checked="" type="checkbox"/>	FLD22 - Heavy Equipment Operation
Moving mech. parts	Overhead hazards/electrocution	<input type="checkbox"/>	FLD23 - Cranes/Lifting Equipment Operation
Working at elevation	Overhead hazards/falls/electrocution	<input type="checkbox"/>	FLD24 - Aerial Lifts/Manlifts
Working at elevation	Overhead hazards/falls/electrocution	<input type="checkbox"/>	FLD25 - Working at Elevation
Working at elevation	Overhead hazards/falls/electrocution/slips	<input type="checkbox"/>	FLD26 - Ladders
Working at elevation	Slips/trips/falls/overhead hazards	<input type="checkbox"/>	FLD27 - Scaffolding
Trench cave-in	Crushing/falling/overhead hazards/suffocation	<input type="checkbox"/>	FLD28 - Excavating/Trenching
Improper material handling	Back injury/crushing from load shifts	<input type="checkbox"/>	FLD29 - Materials Handling
Physiochemical	Explosions/fires from oxidizing, flam/corr. material	<input type="checkbox"/>	FLD30 - Hazardous Materials Use/Storage
Physiochemical	Fire and explosion	<input type="checkbox"/>	FLD31 - Fire Prevention/Response Plan Required
Physiochemical	Fire	<input checked="" type="checkbox"/>	FLD32 - Fire Extinguishers Required
Structural integrity	Overhead/electrocution/slips/trips/falls/fire	<input type="checkbox"/>	FLD33 - Demolition
Electrical	Electrocution/shock/thermal burns	<input type="checkbox"/>	FLD34 - Utilities
Electrical	Electrocution/shock/thermal burns	<input type="checkbox"/>	FLD35 - Electrical Safety
Burns/fires	Heat stress/fires/burns	<input type="checkbox"/>	FLD36 - Welding/Cutting/Burning
Impact/thermal	Thermal burns/high pressure impaction/heat stress	<input type="checkbox"/>	FLD37 - High Pressure Washers
Impaction/electrical	Smashing body parts/pinching/cuts/electrocution	<input type="checkbox"/>	FLD38 - Hand and Power Tools
Poor visibility	Slips/trips/falls	<input type="checkbox"/>	FLD39 - Illumination
Fire/explosion	Burns/impaction	<input type="checkbox"/>	FLD40 - Storage Tank Removal/Decommissioning
Communications	Disruption of communications	<input checked="" type="checkbox"/>	FLD41 - Std. Hand/Emergency Signals
Energy/release	Unexpected release of energy	<input type="checkbox"/>	FLD42 - Lockout/Tagout
Logging/ground clearing/grubbing activities	Operations associated with felling/moving of trees/brush/logs	<input type="checkbox"/>	FLD47 - Clearing, Grubbing, and Logging Operations
Drilling hazards	Electrocution/overhead hazards/pinch points	<input checked="" type="checkbox"/>	1.6 - Drilling Safety Guide

## TASK-BY-TASK RISK ASSESSMENT-FORM 8

### TASK DESCRIPTION

- 1) Geologic Groundwater Investigation/Sampling
- 2) Geologic Soil and Sediment Investigation/Sampling
- 3) Oversight
- 4) Well Installation

### EQUIPMENT REQUIRED/USED

(Be specific, e.g., hand tools, heavy equipment, instruments, PPE)

Geoprobe, Drill, hand auger, TVA 1000, Water Quality instrument, sampling containers, Level D PPE

### POTENTIAL HAZARDS/RISKS

#### Chemical

☒ Hazard Present Risk Level: ☐ H ☐ M ☒ L

What justifies risk level?

Past results indicated TCE and PCE results ranging from 1 to 10 ppb (water) and 5-250 ppm (soil).

#### Physical

☒ Hazard Present Risk Level: ☐ H ☒ M ☐ L

What justifies risk level?

The ground water and soil investigation tools/drill can cause a potential physical hazard if not used properly.  
Working in proximity to traffic may potentially cause a physical hazard.

#### Biological

☒ Hazard Present Risk Level: ☐ H ☐ M ☒ L

What justifies risk level?

Work will be conducted outdoors, where animals or insects may be present.

#### RADIOLOGICAL

☐ Hazard Present Risk Level: ☐ H ☐ M ☐ L

What justifies risk level?

### LEVELS OF PROTECTION/JUSTIFICATION

Level D

### SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED

WESTON FLD/ SOP on site at all times.

## PERSONNEL PROTECTION PLAN-FORM 9

### Engineering Controls

Describe Engineering Controls used as part of Personnel Protection Plan:

#### Task(s)

- 1 Installing restriction area near the drilling or geoprobing.
- 2 Installing restriction area near the drilling or geoprobing.
- 4 Installing restriction area near the drilling or geoprobing.

### Administrative Controls

Describe Administrative Controls used as part of Personnel Protection Plan:

#### Task(s)

- 1 Limit time in the Exclusion Zone. Take proper breaks. Enforce proper PPE usage. Traffic safety signs, cones and reflective vests will be used when working in proximity to traffic.
- 2 Limit time in the Exclusion Zone. Take proper breaks. Enforce proper PPE usage. Traffic safety signs, cones and reflective vests will be used when working in proximity to traffic.
- 3 Limit time in the Exclusion Zone. Take proper breaks. Enforce proper PPE usage. Traffic safety signs, cones and reflective vests will be used when working in proximity to traffic.

### Personal Protective Equipment

Action Levels for Changing Levels of Protection. Refer to HASP Form 13, Site Air Monitoring Program—Action Levels. Define Action Levels for up or down grade for each task:

#### Task(s)

- 1 Level D
- 2 Level D
- 3 Level D

## DESCRIPTION OF LEVELS OF PROTECTION

Level D		Level D Modified	
<b>Task(s):</b>		<b>Task(s):</b>	
<input checked="" type="checkbox"/> Head	Hard Hat	<input type="checkbox"/> Head	
<input checked="" type="checkbox"/> Eye and Face	Safety Glasses	<input type="checkbox"/> Eye and Face	
<input checked="" type="checkbox"/> Hearing (Case by Case basis-SHSC)	Ear Plugs	<input type="checkbox"/> Hearing	
<input type="checkbox"/> Arms and Legs Only		<input type="checkbox"/> Arms and Legs Only	
<input type="checkbox"/> Appropriate Work Uniform		<input type="checkbox"/> Whole Body	
<input checked="" type="checkbox"/> Hand - Gloves	Nitrile-Surgical	<input type="checkbox"/> Apron	
<input checked="" type="checkbox"/> Foot	Safety Boots	<input type="checkbox"/> Hand - Gloves	
<input type="checkbox"/> Fall Protection		<input type="checkbox"/> Gloves	
<input checked="" type="checkbox"/> Waiters (Only during sediment sampling)	Hip length	<input type="checkbox"/> Gloves	
<input checked="" type="checkbox"/> Other (Depending on work location-SHSC)	Reflective Vest	<input type="checkbox"/> Foot - Safety Boots	
		<input type="checkbox"/> Over Boots	

## DESCRIPTION OF LEVELS OF PROTECTION FORM 10

Level C	Level B
<p><b>Task(s):</b></p> <p><input type="checkbox"/> Head</p> <p><input type="checkbox"/> Eye and Face</p> <p><input type="checkbox"/> Hearing</p> <p><input type="checkbox"/> Arms and Legs Only</p> <p><input type="checkbox"/> Whole Body</p> <p style="padding-left: 20px;"><input type="checkbox"/> Apron</p> <p><input type="checkbox"/> Hand - Gloves</p> <p style="padding-left: 20px;"><input type="checkbox"/> Gloves</p> <p style="padding-left: 20px;"><input type="checkbox"/> Gloves</p> <p><input type="checkbox"/> Foot - Safety Boots</p> <p style="padding-left: 20px;"><input type="checkbox"/> Outer Boots</p> <p style="padding-left: 20px;"><input type="checkbox"/> Boots (Other)</p> <hr/> <p><input type="checkbox"/> Half Face</p> <p style="padding-left: 20px;"><input type="checkbox"/> Cart/Canister</p> <p><input type="checkbox"/> Full Face</p> <p style="padding-left: 20px;"><input type="checkbox"/> Cart/Canister</p> <p><input type="checkbox"/> PAPR</p> <p style="padding-left: 20px;"><input type="checkbox"/> Cart/Canister</p> <p><input type="checkbox"/> Type C</p> <p><input type="checkbox"/> Fall Protection</p> <p><input type="checkbox"/> Flotation</p> <p><input type="checkbox"/> Other</p>	<p><b>Task(s):</b></p> <p><input type="checkbox"/> Head</p> <p><input type="checkbox"/> Eye and Face</p> <p><input type="checkbox"/> Hearing</p> <p><input type="checkbox"/> Arms and Legs Only</p> <p><input type="checkbox"/> Whole Body</p> <p style="padding-left: 20px;"><input type="checkbox"/> Apron</p> <p><input type="checkbox"/> Hand - Gloves</p> <p style="padding-left: 20px;"><input type="checkbox"/> Gloves</p> <p style="padding-left: 20px;"><input type="checkbox"/> Gloves</p> <p><input type="checkbox"/> Foot - Safety Boots</p> <p style="padding-left: 20px;"><input type="checkbox"/> Outer Boots</p> <p style="padding-left: 20px;"><input type="checkbox"/> Boots (Other)</p> <hr/> <p><input type="checkbox"/> SAR - Airline</p> <p><input type="checkbox"/> SCBA</p> <p><input type="checkbox"/> Comb. Airline/SCBA</p> <p><input type="checkbox"/> Cascade System</p> <p><input type="checkbox"/> Compressor</p> <p><input type="checkbox"/> Fall Protection</p> <p><input type="checkbox"/> Flotation</p> <p><input type="checkbox"/> Other</p>

# SITE OR PROJECT HAZARD MONITORING PROGRAM-FORM 11

## Air Monitoring Instruments

### Instrument Selection and Initial Check Record

Reporting Format: ☒ Field Notebook ☐ Field Data Sheets\* ☐ Air Monitoring Log ☐ Trip Report ☐ Other

Instrument	Task No.(s)	Number Required	Number Received	Checked Upon Receipt	Comment	Initials
<input type="checkbox"/> CGI				<input type="checkbox"/>		
<input type="checkbox"/> O <sub>2</sub>				<input type="checkbox"/>		
<input type="checkbox"/> CGI/O <sub>2</sub>				<input type="checkbox"/>		
<input type="checkbox"/> CGI/O <sub>2</sub> /tox-PPM, H <sub>2</sub> S, H <sub>2</sub> S/CO				<input type="checkbox"/>		
<input type="checkbox"/> RAD				<input type="checkbox"/>		
<input type="checkbox"/> GM (Pancake)				<input type="checkbox"/>		
<input type="checkbox"/> NaI (Micro R)				<input type="checkbox"/>		
<input type="checkbox"/> ZnS (Alpha Scintillator)				<input type="checkbox"/>		
<input type="checkbox"/> Other _____				<input type="checkbox"/>		
<input checked="" type="checkbox"/> PID				<input type="checkbox"/>		
<input type="checkbox"/> HNu 10.2				<input type="checkbox"/>		
<input type="checkbox"/> HNu 11.7				<input type="checkbox"/>		
<input type="checkbox"/> Photovac, TMA				<input type="checkbox"/>		
<input type="checkbox"/> OVM				<input type="checkbox"/>		
<input type="checkbox"/> Other _____				<input type="checkbox"/>		
<input checked="" type="checkbox"/> FID				<input type="checkbox"/>		
<input type="checkbox"/> Fox 128				<input type="checkbox"/>		
<input type="checkbox"/> Heath, AID, Other				<input type="checkbox"/>		
<input type="checkbox"/> RAM, Mini-RAM, Other _____				<input type="checkbox"/>		
<input type="checkbox"/> Monitox				<input type="checkbox"/>		
Specify: _____				<input type="checkbox"/>		
<input type="checkbox"/> Personal Sampling				<input type="checkbox"/>		
Specify: _____				<input type="checkbox"/>		
<input type="checkbox"/> Bio-Aerosol Monitor				<input type="checkbox"/>		
<input type="checkbox"/> Pump - MSA, Dräger, Sensidyne				<input type="checkbox"/>		
<input type="checkbox"/> Tubes/type: _____				<input type="checkbox"/>		
<input type="checkbox"/> Tubes/type: _____				<input type="checkbox"/>		
<input checked="" type="checkbox"/> Other: TVA 1000 (FID/PID)	1,2,3,4			<input type="checkbox"/>		

1990

[illegible]

\_\_\_\_\_

### Action Levels

These Action Levels, if not defined by regulation, are some percent (usually 50%) of the applicable PEL/TLV/REL. That number must also be adjusted to account for instrument response factors.

	Tasks	Action Level		Action
<input type="checkbox"/> Explosive atmosphere		Ambient Air Concentration	Confined Space Concentration	
		<10% LEL  10 to 25% LEL  >25% LEL	0 to 1% LEL  1 to 10% LEL  >10% LEL	Work may continue. Consider toxicity potential.  Work may continue. Increase monitoring frequency.  Work must stop. Ventilate area before returning.
<input type="checkbox"/> Oxygen		Ambient Air Concentration	Confined Space Concentration	
		<19.5% O <sub>2</sub>  19.5% to 25% O <sub>2</sub>  >25% O <sub>2</sub>	<19.5% O <sub>2</sub>  19.5% to 23.5% O <sub>2</sub>  >23.5% O <sub>2</sub>	Leave area. Re-enter only with self-contained breathing apparatus.  Work may continue. Investigate changes from 21%.  Work must stop. Ventilate area before returning.
<input type="checkbox"/> Radiation		< 3 times background 3 times background to < 1 mR/hour             > 1 mrem/hour		Continue work.  Radiation above background levels (normally 0.01-0.02 mR/hr) signifies possible radiation source(s) present. Continue investigation with caution. Perform thorough monitoring. Consult with a Health Physicist.  Potential radiation hazard. Evacuate site. Continue investigation only upon the advice of Health Physicist.
<input checked="" type="checkbox"/> Organic gases and vapors	1, 2, 3	Level D <5 ppm Level C 5-50 ppm SHSC will determine PPE upgrades and down grades		Continue work Work must stop. PPE upgrade upon the advice of SHSC.
<input type="checkbox"/> Inorganic gases, vapors, and particulates				

# CONTINGENCIES FORM 14

## Emergency Contacts and Phone Numbers

Agency	Contact	Phone Number
Local Medical Emergency Facility (LMF)	Advocate Good Samaritan Hospital	(630) 275-5900
WESTON Medical Emergency Contact	EMR - Dr. Elyane Theriault	1-800-229-3674
WESTON Health and Safety	Corporate Health and Safety	(610) 701-3000
	Ron Bugg/ START H&S Manager	(312) 424-3305
Fire Department	911	911
Police Department	911	911
On-Site Coordinator- SHSC	Ben Maradkel	312/ 424-3314
Client Site Contact	Steve Faryan	312/ 353-9351
Site Telephone	Ben Maradkel	(cell phone) (773) 294-0256
Nearest Telephone	Ben Maradkel	(cell phone) (773) 294-0256

### Local Medical Emergency Facility(s)

Name of Hospital: Advocate Good Samaritan Hospital

Address: 3815 Highland Avenue Downers Grove, IL

Phone No 630.275.5900

#### Type of Service:

- ☐ Physical trauma only  
☐ Chemical exposure only  
☒ Physical trauma and chemical exposure  
☒ Available 24 hours

#### Route to Hospital (written detail):

Left on Belmont. Right on Ogden. Left on Main (Main Street becomes Highland Ave.) See next page for map.

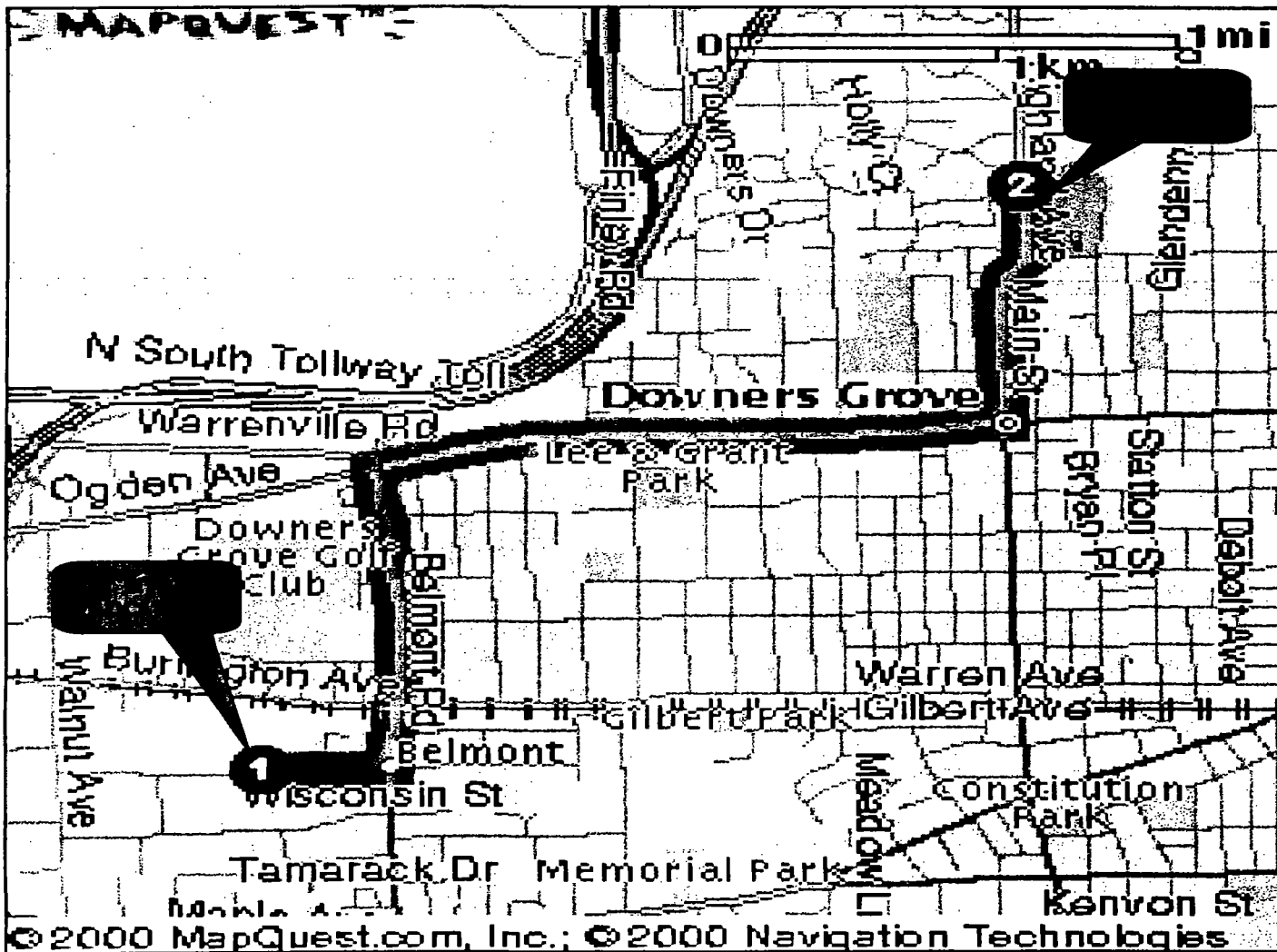
#### Travel time from site:

8 min.

#### Distance to hospital:

3.4





Roy F. Weston, Inc.

Region 5 – Superfund Technical Assessment and Response Team  
3 First National Plaza, Suite 1990, Chicago IL 60602

Title:  
Hospital Map

Figure:  
1

Site:  
Downers Grove Site

Scale: NOT TO SCALE

City:  
Downers Grove

State:  
Illinois

Date:  
1/15/01

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 your door

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Welcome, Guest User

[Create My Locations](#) - [Sign In](#)

## Yahoo! Maps - Driving Directions

Starting from: 2500 Curtiss, Downers Grove, IL 60515-4058

Arriving at: ★ 3815 Highland, Downers Grove, IL 60515-1500

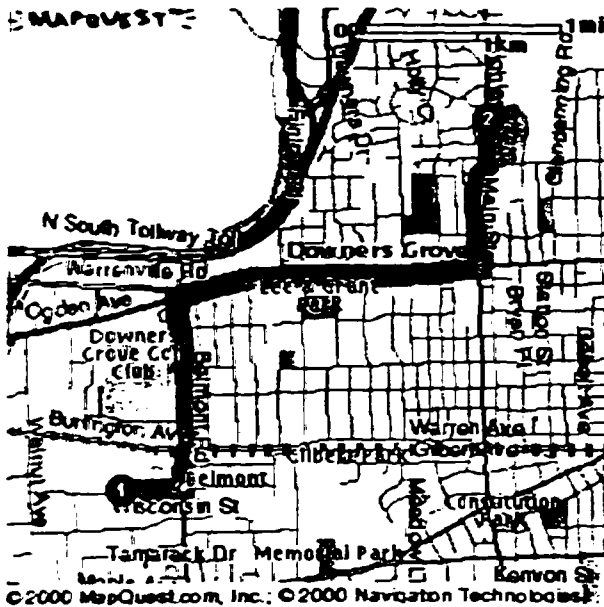
Distance: 3.4 miles

Approximate Travel Time: 8 mins

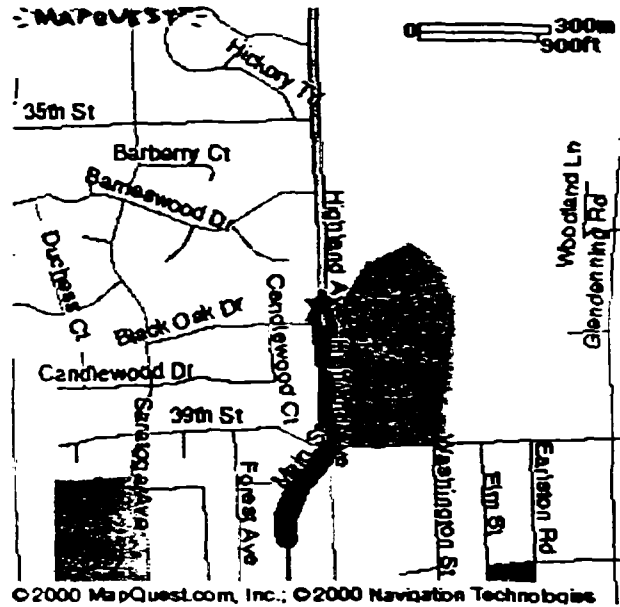
[Email Directions](#)

[Get Reverse Directions](#)

[Text Only Driving Directions](#)



Full Route



Destination

### Directions

Miles

- |  |     |
|--|-----|
| 1. Start out going East on CURTISS ST towards CHASE AVE by turning left. | 0.3 |
| 2. Turn LEFT onto BELMONT RD.  | 1.0 |
| 3. Turn RIGHT onto OGDEN AVE/US-34.                                      | 1.4 |
| 4. Turn LEFT onto MAIN ST.   | 0.5 |
| 5. MAIN ST becomes HIGHLAND AVE.   | 0.2 |

When using any driving directions or map, it's a good idea to do a reality check and make sure the road still exists, watch out for construction, and follow all traffic safety precautions. This is only to be used as an aid in planning.

## CONTINGENCIES-FORM 16

### Response Plans

<b>Medical - General</b>  Provide first aid, if trained; assess and determine need for further medical assistance.  Transport or arrange for transport after appropriate decontamination.	First Aid Kit: YES	Type A	Location Vehicle	Special First-Aid Procedures: Cyanides on-site <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, contact LMF. Do they have antidote kit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Eyewash required <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Type Eye wash solution bottle	Location Vehicle	HF on-site <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, need neutralizing ointment for first-aid kit. Contact LMF.
	Shower required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Type	Location	

Plan for Response to Spill/Release	Plan for Response to Fire/Explosion	Fire Extinguishers YES
In the event of a spill or release, ensure safety, assess situation, and perform containment and control measures, as appropriate.	In the event of a fire or explosion, ensure personal safety, assess situation, and perform containment and control measures, as appropriate:	Type/Location <u>ABC/near work area</u> / / / / / /
a. Cleanup per MSDSs if small; or sound alarm, call for assistance, notify Emergency Coordinator b. Evacuate to pre-determined safe place c. Account for personnel d. Determine if team can respond safely e. Mobilize per Site Spill Response Plan	a. Sound alarm and call for assistance, notify Emergency Coordinator b. Evacuate to predetermined safe place c. Account for personnel d. Use fire extinguisher <u>only if safe and trained</u> in its use e. Stand by to inform emergency responders of materials and conditions	

Description of Spill Response Gear	Location	Description (Other Fire Response Equipment)	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Plan to Respond to Security Problems

## DECONTAMINATION PLAN-FORM 17

### Personnel Decontamination

Consistent with the levels of protection required, step-by-step procedures for personnel decontamination for each level of protection are attached.

### Levels of Protection Required for Decontamination Personnel

The levels of protection required for personnel assisting with decontamination will be:

☐ Level B

☐ Level C

☒ Level D

Modifications include:

### Disposition of Decontamination Wastes

Provide a description of waste disposition, including identification of storage area, hauler, and final disposal site, if applicable:

If contamination is not detected, the material will be considered non-hazards and discarded as such. If the material is determined to be hazards waste the material will be labeled as such & left on site W/ OSC approval.

### Equipment Decontamination

A procedure for decontamination steps required for non-sampling equipment and heavy machinery follows:

All non-disposable drilling (e.g. rods) equipment that comes into contact with site soils, sediments, and surface water will either be steam cleaned or gross decontaminated with distilled-water and brush, washed with Alconox solution and rinsed with distilled water.

### Sampling Equipment Decontamination

Sampling equipment will be decontaminated in accordance with the following procedure:

All non-disposable sampling equipment that comes into contact with site soils, sediments, and surface water will either be steam cleaned or gross decontaminated with distilled-water and brush, washed with Alconox solution and rinsed with distilled water.

**LEVEL D/MODIFIED LEVEL D DECONTAMINATION PLAN-FORM 18**

Check indicated functions or add steps, as necessary:

Function	Description of Process, Solution, and Container
<input type="checkbox"/> Segregated equipment drop	
<input type="checkbox"/> Boot cover and glove wash	
<input type="checkbox"/> Boot cover and glove rinse	
<input checked="" type="checkbox"/> Hip Waiters	Used during sediment sampling. Remove, decon and air dry.
<input checked="" type="checkbox"/> Boot cover removal	Remove and dispose in designated bag.
<input checked="" type="checkbox"/> Outer glove removal	Remove and dispose in designated bag.

**HOTLINE**

- ☐ Suit/safety boot wash
- ☐ Suit/boot/glove rinse
- ☐ Safety boot removal
- ☐ Suit removal
- ☐ Inner glove wash
- ☐ Inner glove rinse
- ☐ Inner glove removal
- ☐ Inner clothing removal

**CONTAMINATION REDUCTION ZONE (CRZ)/SAFE ZONE BOUNDARY**

- ☐ Field wash
- ☐ Redress

**Disposal Plan, End of Day:**

All used disposable PPE and disposal site material (boots, gloves, paper towels etc..) will be properly contained, drummed, and left on site to be disposed of at the discretion of the U.S. EPA OSC. At the end of investigation at each facility, the drums containing IDW will be transferred in a central location for disposal at the end of project.

**Disposal Plan, End of Week:**

All used disposable PPE and disposal site material (boots, gloves, paper towels etc..) will be properly contained, drummed, and left on site to be disposed of at the discretion of the U.S. EPA OSC. At the end of investigation at each facility, the drums containing IDW will be transferred in a central location for disposal at the end of project.

**Disposal Plan, End of Project:**

All used disposable PPE and disposal site material (boots, gloves, paper towels etc..) will be properly contained, drummed, and left on site to be disposed of at the discretion of the U.S. EPA OSC. At the end of investigation at each facility, the drums containing IDW will be transferred in a central location for disposal at the end of project.

# SITE PERSONNEL AND CERTIFICATION STATUS FORM 21

## WESTON

<b>Name:</b> Ben Maradkel <b>Title:</b> Site Lead/ SHSC <b>Task(s):</b> Oversight, Documentation, Sampling, Air Monitoring <b>Certification Level or Description:</b> <input checked="" type="checkbox"/> Medical Current <input checked="" type="checkbox"/> Training Current <input checked="" type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> Om Patel <b>Title:</b> Project Manager <b>Task(s):</b> Oversight <b>Certification Level or Description:</b> <input checked="" type="checkbox"/> Medical Current <input checked="" type="checkbox"/> Training Current <input checked="" type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
<b>Name:</b> Kurt Fischer <b>Title:</b> Geologist <b>Task(s):</b> Oversight <b>Certification Level or Description:</b> <input checked="" type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)

**TRAINING CURRENT - Training:** All personnel, including visitors, entering the exclusion or contamination reduction zones must have certifications of completion of training in accordance with OSHA 29 CFR 1910, 29 CFR 1926, or 29 CFR 1910.120.

**FIT TEST CURRENT - Respirator Fit Testing:** All persons, including visitors, entering any area requiring the use or potential use of any negative pressure respirator must have had, as a minimum, a qualitative fit test, administered in accordance with OSHA 29 CFR 1910.134 or ANSI, within the last 12 months. If site conditions require the use of a full-face, negative-pressure, air-purifying respirator for protection from asbestos or lead, employees must have had a qualitative fit test, administered according to OSHA 29 CFR 1910.1001 or 1025/1926, within the last 6 months.

**MEDICAL CURRENT - Medical Monitoring Requirements:** All personnel, including visitors, entering the exclusion or contamination reduction zones must be certified as medically fit to work and to wear a respirator, if appropriate, in accordance with 29 CFR 1910, 29 CFR 1926/1910, or 29 CFR 1910.120.

The Site Health and Safety Coordinator is responsible for verifying all certifications and fit tests.

## SITE PERSONNEL AND CERTIFICATION STATUS-FORM 22

### Subcontractor's Health and Safety Program Evaluation

**Name of Subcontractor:**  
**Address:**

**Activities To Be Conducted by Subcontractor:**

#### Evaluation Criteria

Medical program meets OSHA/WESTON criteria

☒ Acceptable  
☐ Unacceptable

Comments:

Personal protective equipment available

☒ Acceptable  
☐ Unacceptable

Comments:

On-site monitoring equipment available, calibrated, and operated properly

☒ Acceptable  
☐ Unacceptable

Comments:

Safe working procedures clearly specified

☒ Acceptable  
☐ Unacceptable

Comments:

Training meets OSHA/WESTON criteria

☒ Acceptable  
☐ Unacceptable

Comments:

Emergency procedures

☒ Acceptable  
☐ Unacceptable

Comments:

Decontamination procedures

☒ Acceptable  
☐ Unacceptable

Comments:

General health and safety program evaluation

☒ Acceptable  
☐ Unacceptable

Comments:

Additional comments:

☒ Subcontractor has agreed to and will conform with the WESTON HASP for this project.  
  
☐ Subcontractor will work under his own HASP, which has been accepted by project PM.

**Evaluation Conducted by:**

**Date:**

#### Subcontractor

**Name:**

**Title:**

**Task(s):**

**Certification Level or Description:**

☐ Medical Current ☐ Training Current  
☐ Fit Test Current (Qual.) ☐ Fit Test Current (Quant.)

**Name:**

**Title:**

**Task(s):**

**Certification Level or Description:**

☐ Medical Current ☐ Training Current  
☐ Fit Test Current (Qual.) ☐ Fit Test Current (Quant.)

**Name:**

**Title:**

**Task(s):**

**Certification Level or Description:**

☐ Medical Current ☐ Training Current  
☐ Fit Test Current (Qual.) ☐ Fit Test Current (Quant.)

**Name:**

**Title:**

**Task(s):**

**Certification Level or Description:**

☐ Medical Current ☐ Training Current  
☐ Fit Test Current (Qual.) ☐ Fit Test Current (Quant.)

**Name:**

**Title:**

**Task(s):**

**Certification Level or Description:**

☐ Medical Current ☐ Training Current  
☐ Fit Test Current (Qual.) ☐ Fit Test Current (Quant.)

**Name:**

**Title:**

**Task(s):**

**Certification Level or Description:**

☐ Medical Current ☐ Training Current  
☐ Fit Test Current (Qual.) ☐ Fit Test Current (Quant.)





## TRAINING AND BRIEFING TOPICS-FORM 24

The following items will be covered at the site-specific training meeting, daily or periodically.

<input type="checkbox"/> Site characterization and analysis, Sec. 3.0, 29 CFR 1910.120 I	<input type="checkbox"/> Level A
<input checked="" type="checkbox"/> Physical hazards, HASP Form 07	<input type="checkbox"/> Level B
<input checked="" type="checkbox"/> Chemical hazards, HASP Form 04	<input type="checkbox"/> Level C
<input type="checkbox"/> Animal bites, stings, and poisonous plants	<input checked="" type="checkbox"/> Level D
<input type="checkbox"/> Etiologic (infectious) agents	<input checked="" type="checkbox"/> Monitoring, 29 CFR 1910.120 (h)
<input checked="" type="checkbox"/> Site control, 29 CFR 1910.120 d	<input checked="" type="checkbox"/> Decontamination, 29 CFR 1910.120 (k)
<input type="checkbox"/> Engineering controls and work practices, 29 CFR 1910.120 (g)	<input type="checkbox"/> Emergency response, 29 CFR 1910.120 (l)
<input checked="" type="checkbox"/> Heavy machinery	<input checked="" type="checkbox"/> Elements of an emergency response, 29 CFR 1910.120 (l)
<input type="checkbox"/> Forklift	<input type="checkbox"/> Procedures for handling site emergency incidents, 29 CFR 1910.120 (l)
<input type="checkbox"/> Backhoe	<input type="checkbox"/> Off-site emergency response, 29 CFR 1910.120 (l)
<input checked="" type="checkbox"/> Equipment	<input type="checkbox"/> Handling drums and containers, 29 CFR 1910.120 (j)
<input type="checkbox"/> Tools	<input type="checkbox"/> Opening drums and containers
<input type="checkbox"/> Ladder, 29 CFR 1910.27 (d)/29 CFR 1926	<input type="checkbox"/> Electrical material handling equipment
<input type="checkbox"/> Overhead and underground utilities	<input type="checkbox"/> Radioactive waste
<input type="checkbox"/> Scaffolds	<input type="checkbox"/> Shock-sensitive waste
<input type="checkbox"/> Structural integrity	<input type="checkbox"/> Laboratory waste packs
<input type="checkbox"/> Unguarded openings - wall, floor, ceilings	<input type="checkbox"/> Sampling drums and containers
<input type="checkbox"/> Pressurized air cylinders	<input type="checkbox"/> Shipping and transport, 49 CFR 172.101, IATA
<input checked="" type="checkbox"/> Personal protective equipment, 29 CFR 1910.120 (g); 29 CFR 1910.134	<input type="checkbox"/> Tank and vault procedures
<input type="checkbox"/> Respiratory protection, 29 CFR 1910.120 (g); ANSI Z88.2	<input type="checkbox"/> Illumination, 29 CFR 1910.120 (m)
<input type="checkbox"/>	<input type="checkbox"/> Sanitation, 29 CFR 1910.120 (n)
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

# HEALTH AND SAFETY EVALUATION- 1 CHEMICAL HAZARDS-FORM 25

<b>Hazardous Substance/Tasks</b>	<b>Physical Properties</b> <input type="checkbox"/> Explosive <input type="checkbox"/> Flammable <input type="checkbox"/> Corrosive <input type="checkbox"/> Reactive <input type="checkbox"/> Water Reactive <input type="checkbox"/> Oxidizer <input type="checkbox"/> Radioactive <input type="checkbox"/> Other	<b>Normal Physical State</b> <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas	<b>State At Site/Proj. Temp.</b> <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas	<b>Characteristics</b> pH: _____ FP: _____ LEL: _____ UEL: _____ Auto. Ig.: _____ BP: _____ MP: _____ Sp. Gr.: _____ Vap. D.: _____ Vap. P.: _____ H <sub>2</sub> O Sol.: _____ Other: _____	<b>Exposure Limits</b> <input type="checkbox"/> CA _____ <input type="checkbox"/> PEL _____ <input type="checkbox"/> TLV _____ <input type="checkbox"/> IDLH _____ <input type="checkbox"/> Only toxicological data available <input type="checkbox"/> Other: _____	<b>Route(s) of Exposure/Symptoms</b> <input type="checkbox"/> Inhalation <input type="checkbox"/> Ingestion <input type="checkbox"/> Skin Absorption <input type="checkbox"/> Contact <input type="checkbox"/> Direct Penetration <input type="checkbox"/> Other: _____	<b>Monitoring Instrument/Ionization Potential + % Response</b> <input type="checkbox"/> HNu <input type="checkbox"/> 11.7 eV <input type="checkbox"/> 10.2 eV <input type="checkbox"/> OVM <input type="checkbox"/> 10.0/10.6 eV <input type="checkbox"/> 11.8 eV <input type="checkbox"/> CGI <input type="checkbox"/> OVA <input type="checkbox"/> _____
<b>CAS No:</b>  <b>Synonyms:</b>	Symptoms:						IP:  % Response:

## SITE-SPECIFIC HAZARD COMMUNICATION PROGRAM-FORM 28

### ***Location-Specific Hazard Communication Program/Checklist***

To ensure an understanding of and compliance with the Hazard Communication Standard, WESTON will use this checklist/document (or similar document) in conjunction with the WESTON Written Hazard Communication Program as a means of meeting site- or location-specific requirements.

While responsibility for activities within this document reference the WESTON Safety Officer (SO), it is the responsibility of all personnel to effect compliance. Responsibilities under various conditions can be found within the WESTON Written Hazard Communication Program.

To ensure that information about the dangers of all hazardous chemicals used by WESTON are known by all affected employees, the following Hazard Communication Program has been established. All affected personnel will participate in the Hazard Communication Program. This written program, as well as WESTON's Corporate Hazard Communication Program, will be available for review by any employee, employee representative, representative of OSHA, NIOSH, or any affected employer/employee on a multi-employer site.

- ☒ Site or other location name/address: 70 West Madison Chicago, IL Suite 1900 (WESTON office)
- ☒ Site/Project/Location Manager: Downers Grove Site/ OM Patel, Project Manager
- ☒ Site/Location Safety Officer: Downers Grove Site/ Ben Maradkel
- ☒ List of chemicals compiled, format: ☒ HASP ☐ Other: TCE, PCE
- ☒ Location of MSDS files: HASP (on site)
- ☒ Training conducted by: Name: \_\_\_\_\_ Date: \_\_\_\_\_
- ☒ Indicate format of training documentation: ☐ Field Log: ☒ Other: Certificates at office
- ☒ Client briefing conducted regarding hazard communication: PM
- ☒ If multi-employer site (client, subcontractor, agency, etc.), indicate name of affected companies:  
TBD
- ☒ Other employer(s) notified of chemicals, labeling, and MSDS information: TBD
- ☒ Has WESTON been notified of other employer's or client's hazard communication program(s), as necessary? ☐ Yes ☒ No

### ***List of Hazardous Chemicals***

A list of known hazardous chemicals used by WESTON personnel must be prepared and attached to this document or placed in a centrally identified location with the MSDSs. Further information on each chemical may be obtained by reviewing the appropriate MSDS. The list will be arranged to enable cross-reference with the MSDS file and the label on the container. The SO or Location Manager is responsible for ensuring the chemical listing remains up-to-date.

### ***Container Labeling***

The WESTON SO will verify that all containers received from the chemical manufacturer, importer, or distributor for use on-site are clearly labeled.

The SO is responsible for ensuring that labels are placed where required and for comparing MSDSs and other information with label information to ensure correctness.

## ***Material Safety Data Sheets (MSDSs)***

**FORM 28**

The SO is responsible for establishing and monitoring WESTON's MSDS program for the location. The SO will ensure that procedures are developed to obtain the necessary MSDSs and will review incoming MSDSs for new or significant health and safety information. He/she will see that any new information is passed on to the affected employees. If an MSDS is not received at the time of initial shipment, the SO will call the manufacturer and have an MSDS delivered for that product in accordance with the requirements of WESTON's Written Hazard Communication Program.

A log for, and copies of, MSDSs for all hazardous chemicals in use will be kept in the MSDS folder at a location known to all site workers. MSDSs will be readily available to all employees during each work shift. If an MSDS is not available, immediately contact the WESTON SO or the designated alternate. When a revised MSDS is received, the SO will immediately replace the old MSDS.

### ***Employee Training and Information***

The SO is responsible for the WESTON site-specific personnel training program. The SO will ensure that all program elements specified below are supplied to all affected employees.

At the time of initial assignment for employees to the work site, or whenever a new hazard is introduced into the work area, employees will attend a health and safety meeting or briefing that includes the information indicated below.

- Hazardous chemicals present at the work site.
- Physical and health risks of the hazardous chemicals.
- The signs and symptoms of overexposure.
- Procedures to follow if employees are overexposed to hazardous chemicals.
- Location of the MSDS file and Written Hazard Communication Program.
- How to determine the presence or release of hazardous chemicals in the employee's work area.
- How to read labels and review MSDSs to obtain hazard information.
- Steps WESTON has taken to reduce or prevent exposure to hazardous chemicals.
- How to reduce or prevent exposure to hazardous chemicals through the use of controls procedures, work practices, and personal protective equipment.
- Hazardous, nonroutine tasks to be performed (if any).
- Chemicals within unlabeled piping (if any).

### ***Hazardous Nonroutine Tasks***

When employees are required to perform hazardous nonroutine tasks, the affected employee(s) will be given information by the SO about the hazardous chemicals he or she may use during such activity. This information will include specific chemical hazards, protective and safety measures the employee can use, and steps WESTON is using to reduce the hazards. These steps include, but are not limited to, ventilation, respirators, presence of another employee, and emergency procedures.

### ***Chemicals in Unlabeled Pipes***

Work activities may be performed by employees in areas where chemicals are transferred through unlabeled pipes. Prior to starting work in these areas, the employee will contact the SO, at which time information as to the chemical(s) in the pipes, potential hazards of the chemicals or the process involved, and the safety precautions that should be taken will be determined and presented.

### ***Multi-Employer Work Sites***

It is the responsibility of the SO to provide other employers with information about hazardous chemicals imported by WESTON to which their employees may be exposed, along with suggested safety precautions. It is also the responsibility of the SO and the Site Manager to obtain information about hazardous chemicals used by other employers to which WESTON

employees may be exposed. WESTON's chemical listing will be made available to other employers, as requested. MSDSs will be available for viewing, as necessary. The location, format, and/or procedures for accessing MSDS information must be relayed to affected employees.

# SITE AIR MONITORING PROGRAM-FORM 29

## Field Data Sheets

Location:

% LEL	% O <sub>2</sub>	PID (units)	FID (units)	Aerosol Monitor (mg/m <sup>3</sup> )	GM: Shield Probe/Thin Window		NaI (uR/hr)	ZnS (cpm)
					mR/hr	cpm		
Monitor (ppm)				Detector Tube(s)				
Sound Levels (dBA)		Illumination	pH	Other	Other	Other	Other	Other

Location:

% LEL	% O <sub>2</sub>	PID (units)	FID (units)	Aerosol Monitor (mg/m <sup>3</sup> )	GM: Shield Probe/Thin Window		NaI (uR/hr)	ZnS (cpm)
					mR/hr	cpm		
Monitor (ppm)				Detector Tube(s)				
Sound Levels (dBA)		Illumination	pH	Other	Other	Other	Other	Other

# NIOSH Pocket Guide to Chemical Hazards

<b>Trichloroethylene</b>		CAS 79-01-6
<b>CICH=CCl<sub>2</sub></b>		RTECS <u>KX4550000</u>
<b>Synonyms &amp; Trade Names</b> Ethylene trichloride, TCE, Trichloroethene, Trilene		<b>DOT ID &amp; Guide</b> 1710 160
<b>Exposure Limits</b>	NIOSH REL: Ca See Appendix A See Appendix C	
	OSHA PEL†: TWA 100 ppm C 200 ppm 300 ppm (5-minute maximum peak in any 2 hours)	
IDLH Ca [1000 ppm] See: <u>79016</u>		Conversion 1 ppm = 5.37 mg/m <sup>3</sup>
<b>Physical Description</b> Colorless liquid (unless dyed blue) with a chloroform-like odor.		
MW: 131.4	BP: 189°F	FRZ: -99°F
VP: 58 mmHg	IP: 9.45 eV	Sol(77°F): 0.1%
Fl.P: ?	UEL(77°F): 10.5%	LEL(77°F): 8%
Combustible Liquid, but burns with difficulty.		
<b>Incompatibilities &amp; Reactivities</b> Strong caustics & alkalis; chemically-active metals (such as barium, lithium, sodium, magnesium, titanium & beryllium)		
<b>Measurement Methods</b> NIOSH <u>1022</u> , <u>3800</u> ; OSHA <u>1001</u> See: <u>NMAM</u> or <u>OSHA Methods</u>		
<b>Personal Protection &amp; Sanitation</b> Skin: Prevent skin contact Eyes: Prevent eye contact Wash skin: When contaminated Remove: When wet or contaminated Change: No recommendation Provide: Eyewash, Quick drench		<b>First Aid (See procedures)</b> Eye: Irrigate immediately Skin: Soap wash promptly Breathing: Respiratory support Swallow: Medical attention immediately
<b>Respirator Recommendations NIOSH</b> At concentrations above the NIOSH REL, or where there is no REL, at any detectable concentration: (APF = 10,000) Any self-contained breathing apparatus that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode/(APF = 10,000) Any supplied-air respirator that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode in combination with an auxiliary self-contained positive-pressure breathing apparatus Escape: (APF = 50) Any air-purifying, full-facepiece respirator (gas mask) with a chin-style, front- or back-mounted organic vapor canister/Any appropriate escape-type, self-contained breathing apparatus		
<b>Exposure Routes</b> inhalation, skin absorption, ingestion, skin and/or eye contact		
<b>Symptoms</b> Irritation eyes, skin; headache, visual disturbance, lassitude (weakness, exhaustion), dizziness, tremor, drowsiness, nausea, vomiting; dermatitis; cardiac arrhythmias, paresthesia; liver injury; [potential occupational carcinogen]		
<b>Target Organs</b> Eyes, skin, respiratory system, heart, liver, kidneys, central nervous system		

# NIOSH Pocket Guide to Chemical Hazards

<b>Tetrachloroethylene</b>		CAS 127-18-4
$\text{Cl}_2\text{C}=\text{CCl}_2$		RTECS KX3850000
<b>Synonyms &amp; Trade Names</b> Perchloroethylene, Perchloroethylene, Perk, Tetrachlorethylene		<b>DOT ID &amp; Guide</b> 1897 160
<b>Exposure Limits</b>	NIOSH REL: Ca Minimize workplace exposure concentrations. See Appendix A	
	OSHA PEL†: TWA 100 ppm C 200 ppm 300 ppm (5-minute maximum peak in any 3-hours)	
IDLH Ca [150 ppm] See: 127184		Conversion 1 ppm = 6.78 mg/m <sup>3</sup>
<b>Physical Description</b> Colorless liquid with a mild, chloroform-like odor.		
MW: 165.8	BP: 250°F	FRZ: -2°F
VP: 14 mmHg	IP: 9.32 eV	Sol: 0.02%
Fl.P: NA	UEL: NA	LEL: NA
Noncombustible Liquid, but decomposes in a fire to hydrogen chloride and phosgene.		
<b>Incompatibilities &amp; Reactivities</b> Strong oxidizers; chemically-active metals such as lithium, beryllium & barium; caustic soda; sodium hydroxide; potash		
<b>Measurement Methods</b> NIOSH 1003; OSHA 1001 See: NMAM or OSHA Methods		
<b>Personal Protection &amp; Sanitation</b> Skin: Prevent skin contact Eyes: Prevent eye contact Wash skin: When contaminated Remove: When wet or contaminated Change: No recommendation Provide: Eyewash, Quick drench		<b>First Aid (See procedures)</b> Eye: Irrigate immediately Skin: Soap wash promptly Breathing: Respiratory support Swallow: Medical attention immediately
<b>Respirator Recommendations NIOSH</b> At concentrations above the NIOSH REL, or where there is no REL, at any detectable concentration: (APF = 10,000) Any self-contained breathing apparatus that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode/(APF = 10,000) Any supplied-air respirator that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode in combination with an auxiliary self-contained positive-pressure breathing apparatus Escape: (APF = 50) Any air-purifying, full-facepiece respirator (gas mask) with a chin-style, front- or back-mounted organic vapor canister/Any appropriate escape-type, self-contained breathing apparatus		
<b>Exposure Routes</b> inhalation, skin absorption, ingestion, skin and/or eye contact		
<b>Symptoms</b> Irritation eyes, skin, nose, throat, respiratory system; nausea; flush face, neck; dizziness, incoordination; headache, drowsiness; skin erythema (skin redness); liver damage; [potential occupational carcinogen]		
<b>Target Organs</b> Eyes, skin, respiratory system, liver, kidneys, central nervous system		





EM SCIENCE

REVISED

111 Woodcrest Road, P.O. Box 5018, Cherry Hill, N.J. 08034-0396, Phone (609) 354-9200

## MATERIAL SAFETY DATA SHEET

Essentially Similar to U.S. Department of Labor Form OSHA-20

SECTION 1		NAME & PRODUCT	
Chemical Name: Methanol	MX0475, Catalog Number: MX0489 MX0483, MX0485, MX0487, MX0488, MX0490		
Trade Name & Synonyms: Methyl Alcohol, Wood Alcohol	Chemical Family: Alcohols		
Formula: $\text{CH}_3\text{OH}$	CA #67-56-1	Formula Weight: 32.04	
<b>SECTION 2 PHYSICAL DATA</b>			
Boiling Point, 760 mm Hg (°C)	64.5°C	Specific Gravity ( $\text{H}_2\text{O} = 1$ )	0.79
Melting Point (°C)	-144°F	Solubility in $\text{H}_2\text{O}$ , % by wt. at 20°C	Soluble
Vapor Pressure at 20°C	96 mm Hg	Appearance and Odor colorless liquid	
Vapor Density (air = 1)	1.1	slight alcoholic odor	
Percent Volatiles by Volume	100	Evaporation Rate (Butyl Acetate = 1)	5.91
<b>SECTION 3 FIRE AND EXPLOSION HAZARD DATA</b>			
Flash Point (test method) 52°F (ccc)	Flammable Limits	LeI 6.7%	Uel 35%
Extinguishing Media $\text{CO}_2$ , dry chemical, foam	Water spray to cool fire-exposed containers Water spray to disperse vapors		
Special Hazards and Procedures Wear self-contained breathing apparatus			
Unusual Fire and Explosion Hazards	Addition of water to burning fuel may reduce intensity of flame		
<b>SECTION 4 REACTIVITY DATA</b>			
Stable X	Conditions to Avoid		
Unstable	heat, sparks, open flame		
Materials to Avoid Oxidizers			
Hazardous Decomposition Products $\text{CO}_x$			
<b>SECTION 5 SPILL OR LEAK PROCEDURES AND DISPOSAL</b>			
Steps to be Taken in Case Material is Released or Spilled		Evacuate non-essential personnel. Absorb with sand.	
Waste Disposal Method		To be performed in compliance with all current local, state and federal regulations	

The statements contained herein are offered for informational purposes only and are intended to be followed only by persons having related technical skills and at their own discretion and risk. Since conditions and manner of use are outside our control, we make no warranties, express or implied, and assume no liability in connection with any use of this information.

## SECTION 6

## HEALTH HAZARD DATA

Threshold Limit Value

OSHA std-air: TWA 200 ppm

TXDS: orl <sup>LD</sup> LDLo: 340 mg/kg

### Effects of Overexposure

Highly toxic by fumes and contact; ingest. (on may be fatal and daily contact will have cumulative effect. May cause inebriation, nausea, vomiting; central nervous system damage; blindness; defatting, drying and cracking of the skin.

### First Aid Procedures

Skin: wash with soap/water; get medical assistance for skin irritation  
Eyes: flush with water 15 minutes; get medical assistance  
Inhalation: remove to fresh air; get medical assistance  
Ingestion: induce vomiting if conscious; get medical assistance

## SECTION 7

## SPECIAL PROTECTION INFORMATION

Ventilation, Respiratory Protection, Protective Clothing, Eye Protection

Provide adequate general mechanical and local exhaust ventilation  
Protect eyes and skin with safety goggles and gloves  
Wear air-supplied mask; face shield may be necessary  
Do not breathe vapor  
Do not get in eyes or on clothing

## SECTION 8

## SPECIAL HANDLING AND STORING PRECAUTIONS

Keep container tightly closed  
No smoking or flames  
Store in a well-ventilated area, away from sources of ignition  
Avoid prolonged or repeated contact with skin  
If ingested, can cause blindness; cannot be made non-poisonous

## SECTION 9

## HAZARDOUS INGREDIENTS

(refer to section 3 through 8)

## SECTION 10

## OTHER INFORMATION

NFPA 704: 1 3 0  
Health Flammability Reactivity

EMERGENCY PHONE NUMBER (809) 423-6300

AUTHORIZED SIGNATURE

*[Signature]*

DATE ISSUED:

10/83

DATE REVISED:

5/85

EM001474

# MATERIAL SAFETY DATA SHEET



## LIQUID CARBONIC

SPECIALTY GAS CORPORATION

135 SOUTH LA SALLE STREET • CHICAGO ILLINOIS 60603 (428)  
PHONE (312) 855-2500

Isobutylene

Revision Feb. 1987

24 Hour Emergency Phone Numbers: (504) 673-8831; CHEMTREC (800) 424-9300

### SECTION I--PRODUCT IDENTIFICATION

CHEMICAL NAME: Isobutylene

COMMON NAME AND SYNONYMS: Isobutene, 2-Methylpropene

CHEMICAL FAMILY: Aliphatic Hydrocarbons

FORMULA:  $(CH_3)_2CH$

### SECTION II--HAZARDOUS INGREDIENTS

MATERIAL	VOLUME %	CAS NO.	1985-6 ACGIH TLV UNITS
Isobutylene	99.5	115-11-7	TWA 1,000 ppm STEL 1,250 ppm for LPG (Liquified Petroleum Gas)

### SECTION III--PHYSICAL DATA

BOILING POINT (°F.)	19.6	SPECIFIC GRAVITY (H <sub>2</sub> O=1)	0.594 @ 20°C
VAPOR PRESSURE (mmHg.)	24.3 psig @ 70°F	% VOLATILE BY VOLUME	100
VAPOR DENSITY (AIR=1)	2.011	EVAPORATION RATE (BUTYL ACETATE=1)	Rapid
SOLUBILITY IN WATER	Insoluble		
APPEARANCE AND ODOR	A colorless flammable gas with an unpleasant odor similar to coal gas.		

### SECTION IV--FIRE AND EXPLOSION HAZARD DATA

FLASH POINT (METHOD USED) -105°F (C.C.) FLAMMABLE LIMITS 

LEL	UEL
1.8	8.8

EXTINGUISHING MEDIA: Carbon Dioxide, dry chemical, halon and water.

SPECIAL FIRE FIGHTING PROCEDURES: Stop flow of gas if possible. Use water spray to cool fire exposed containers. If feasible, allow fire to burn itself out to avoid accumulation of an unburned flammable mixture.

UNUSUAL FIRE AND EXPLOSION HAZARDS: Keep personnel away from fire scene since containers can rupture violently when exposed to fire. Fire fighters should use self-contained breathing apparatus and protective clothing. Unless gas supply is shut-off, it can reignite or explode. Vapor can flow to distant ignition source than flash back.

### SECTION V--HEALTH HAZARD DATA

Route(s) of Entry: Inhalation? Yes Skin? Yes Ingestion? No

Carcinogenicity: NTP? No IARC Monographs? No OSHA? No

EFFECTS OF OVEREXPOSURE: Isobutylene is defined as a simple asphyxiant by displacing air. Can cause dizziness, drowsiness, and eventual unconsciousness. Liquid contact with eyes or skin may cause tissue freezing or frostbite.

EMERGENCY AND FIRST AID PROCEDURES: If inhaled: Remove to fresh air. Obtain prompt medical assistance. Unconscious persons should be given artificial resuscitation and supplemental oxygen. Keep warm and at rest.

Eye or skin contact: Promptly flush affected areas with copious quantities of tepid water (105-115°F). Remove contaminated clothing. A physician should see the patient promptly, if cryogenic burn has resulted in blistering of the dermal surface or deep tissue freezing.

## SECTION VI--REACTIVITY DATA

STABILITY: UNSTABLE ( ) STABLE (X)

CONDITIONS TO AVOID: Heat, flame, direct sunlight and ignition sources.

INCOMPATIBILITY (MATERIALS TO AVOID): Oxygen and strong oxidizing agents.

HAZARDOUS DECOMPOSITION PRODUCTS: CO<sub>2</sub> and water vapor. Can produce carbon monoxide when oxidized with deficiency of oxygen.

HAZARDOUS POLYMERIZATION: MAY OCCUR ( ) WON'T OCCUR (X)

CONDITIONS TO AVOID: N/A

## SECTION VII--SPILL OR LEAK PROCEDURES

STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED: Evacuate all personnel from affected area. Stop leaks if possible. Emergency personnel should use self-contained breathing apparatus and should have protective clothing. Eliminate sources of ignition. Supply maximum ventilation with explosion-proof equipment.

WASTE DISPOSAL METHOD: Relocate leaking containers in a remote downwind area out doors, and allow to vent to atmosphere. Incinerate gas by controlled burning in flare if possible. Follow Federal, State and Local regulations.

## SECTION VIII--SPECIAL PROTECTION INFORMATION

RESPIRATORY PROTECTION: Use self-contained breathing apparatus when necessary.

VENTILATION: LOCAL EXHAUST (X) Provide adequate ventilation in surps,  
MECHANICAL (GENERAL) (X) confined areas and to meet TWA standards.

PROTECTIVE GLOVES: Rubber or plastic EYE PROTECTION: Safety goggles, safety glasses or face shield.

OTHER PROTECTIVE EQUIPMENT: Safety shoes, eyewash, safety shower and protective clothing if liquid contact potential exists.

## SECTION IX--SPECIAL PRECAUTIONS

PRECAUTIONS TO BE TAKEN IN HANDLING AND STORING: Protect cylinders against physical damage. Store in cool, dry, well-ventilated area, away from sources of heat and ignition. Keep away from oxidizers such as oxygen, chlorine and fluorine. Electrical equipment should be explosion-proof. Piping connections and containers should be grounded. Use check valve or trap in discharge line to prevent hazardous back flow. Post "No Smoking" or "Open Flame" signs in storage and use areas. Cylinder temperature should be kept under 130°F.

OTHER PRECAUTIONS: Use only DOT or ASME coded containers. Electrically ground all lines and equipment. Cylinders must not be recharged except by or with consent of Liquid Carbonic. For more information, refer to CGA Bulletin S5-2 "Oxygen Deficient Atmospheres" and CGA Pamphlet P-1 "Safe Handling of Compressed Gases in containers."

No guaranty is made as to the accuracy of any data or statement contained herein. While this material is furnished in good faith, NO WARRANTY EXPRESS OR IMPLIED, OF MERCHANTABILITY, FITNESS OR OTHERWISE IS MADE. This material is offered only for your consideration, investigation and verification and Liquid Carbonic shall not in any event be liable for special, incidental or consequential damages in connection with its publication.

**MSDS**

**Material Safety Data Sheet**

From: Mallinckrodt Baker, Inc.  
222 Red School Lane  
Phillipsburg, NJ 08865



24 Hour Emergency Telephone: 800-458-2151  
CHEMTREC: 1-800-424-9300

National Response in Canada  
CANUTEC: 613-496-6666

Outside U.S. and Canada  
Chemtrac: 703-527-3887

NOTE: CHEMTREC, CANUTEC and National Response Center emergency numbers to be used only in the event of chemical emergencies involving a spill, leak, fire, exposure or accident involving chemicals.

All non-emergency questions should be directed to Customer Service (1-800-582-2537) for assistance.

**TRICHLOROETHYLENE**

MSDS Number: T4940 — Effective Date: 09/14/00

**1. Product Identification**

Synonyms: Trichloroethene; TCE; acetylene trichloride; Ethinyl trichloride

CAS No.: 79-01-6

Molecular Weight: 131.39

Chemical Formula: C<sub>2</sub>HCl<sub>3</sub>

Product Codes:

J.T. Baker: 5376, 9454, 9458, 9464, 9473, 9474

Mallinckrodt: 8598, 8600, 8633

**2. Composition/Information on Ingredients**

Ingredient	CAS No	Percent	Hazardous
Trichloroethylene	79-01-6	100%	Yes

**3. Hazards Identification**

**Emergency Overview**

**WARNING! HARMFUL IF SWALLOWED OR INHALED. AFFECTS HEART, CENTRAL NERVOUS SYSTEM, LIVER AND KIDNEYS. CAUSES SEVERE SKIN IRRITATION. CAUSES IRRITATION TO EYES AND RESPIRATORY TRACT. SUSPECT CANCER HAZARD. MAY CAUSE CANCER. Risk of cancer depends on level and duration of exposure.**

J.T. Baker SAF-T-DATA<sup>(tm)</sup> Ratings (Provided here for your convenience)

Health Rating: 3 - Severe (Cancer Causing)

Flammability Rating: 1 - Slight

Reactivity Rating: 1 - Slight

Contact Rating: 2 - Moderate

Lab Protective Equip: GOGGLES & SHIELD; LAB COAT & APRON; VENT HOOD; PROPER GLOVES

Storage Color Code: Blue (Health)

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### **Potential Health Effects**

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#### **Inhalation:**

Vapors can irritate the respiratory tract. Causes depression of the central nervous system with symptoms of visual disturbances and mental confusion, incoordination, headache, nausea, euphoria, and dizziness. Inhalation of high concentrations could cause unconsciousness, heart effects, liver effects, kidney effects, and death.

#### **Ingestion:**

Cases irritation to gastrointestinal tract. May also cause effects similar to inhalation. May cause coughing, abdominal pain, diarrhea, dizziness, pulmonary edema, unconsciousness. Kidney failure can result in severe cases. Estimated fatal dose is 3-5 ml/kg.

#### **Skin Contact:**

Cause irritation, redness and pain. Can cause blistering. Continued skin contact has a defatting action and can produce rough, dry, red skin resulting in secondary infection.

#### **Eye Contact:**

Vapors may cause severe irritation with redness and pain. Splashes may cause eye damage.

#### **Chronic Exposure:**

Chronic exposures may cause liver, kidney, central nervous system, and peripheral nervous system effects. Workers chronically exposed may exhibit central nervous system depression, intolerance to alcohol, and increased cardiac output. This material is linked to mutagenic effects in humans. This material is also a suspect carcinogen.

#### **Aggravation of Pre-existing Conditions:**

Persons with pre-existing skin disorders, cardiovascular disorders, impaired liver or kidney or respiratory function, or central or peripheral nervous system disorders may be more susceptible to the effects of the substance.

---

## **4. First Aid Measures**

#### **Inhalation:**

Remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. Call a physician.

#### **Ingestion:**

Induce vomiting immediately as directed by medical personnel. Never give anything by mouth to an unconscious person. Call a physician.

#### **Skin Contact:**

Immediately flush skin with plenty of soap and water for at least 15 minutes while removing contaminated clothing and shoes. Get medical attention. Wash clothing before reuse. Thoroughly clean shoes before reuse.

#### **Eye Contact:**

Immediately flush eyes with plenty of water for at least 15 minutes, lifting lower and upper eyelids occasionally. Get medical attention immediately.

#### **Note to Physician:**

Do not administer adrenaline or epinephrine to a victim of chlorinated solvent poisoning.

## 4. Fire Fighting Measures

### Fire:

Autoignition temperature: 420C (788F)

Flammable limits in air % by volume:

lcl: 8; ucl: 12.5

### Explosion:

A strong ignition source, e. g., a welding torch, can produce ignition. Sealed containers may rupture when heated.

### Fire Extinguishing Media:

Use water spray to keep fire exposed containers cool. If substance does ignite, use CO2, dry chemical or foam.

### Special Information:

In the event of a fire, wear full protective clothing and NIOSH-approved self-contained breathing apparatus with full facepiece operated in the pressure demand or other positive pressure mode.

Combustion by-products include phosgene and hydrogen chloride gases. Structural firefighters' clothing provides only limited protection to the combustion products of this material.

## 5. Accidental Release Measures

Ventilate area of leak or spill. Remove all sources of ignition. Wear appropriate personal protective equipment as specified in Section 8. Isolate hazard area. Keep unnecessary and unprotected personnel from entering. Contain and recover liquid when possible. Use non-sparking tools and equipment. Collect liquid in an appropriate container or absorb with an inert material (e. g., vermiculite, dry sand, earth), and place in a chemical waste container. Do not use combustible materials, such as saw dust. Do not flush to sewer! US Regulations (CERCLA) require reporting spills and releases to soil, water and air in excess of reportable quantities. The toll free number for the US Coast Guard National Response Center is (800) 424-8802.

## 7. Handling and Storage

Keep in a tightly closed container, stored in a cool, dry, ventilated area. Protect against physical damage. Isolate from any source of heat or ignition. Isolate from incompatible substances. Containers of this material may be hazardous when empty since they retain product residues (vapors, liquid); observe all warnings and precautions listed for the product.

## 8. Exposure Controls/Personal Protection

### Airborne Exposure Limits:

Trichloroethylene:

-OSHA Permissible Exposure Limit (PEL):

100 ppm (TWA), 200 ppm (Ceiling),

300 ppm/5min/2hr (Max)

-ACGIH Threshold Limit Value (TLV):

50 ppm (TWA) 100 ppm (STEL);

listet as A5, not suspected as a human carcinogen.

**Ventilation System:**

A system of local and/or general exhaust is recommended to keep employee exposures below the Airborne Exposure Limits. Local exhaust ventilation is generally preferred because it can control the emissions of the contaminant at its source, preventing dispersion of it into the general work area. Please refer to the ACGIH document, *Industrial Ventilation, A Manual of Recommended Practices*, most recent edition, for details.

**Personal Respirators (NIOSH Approved):**

If the exposure limit is exceeded and engineering controls are not feasible, wear a supplied air, full-facepiece respirator, airlined hood, or full-facepiece self-contained breathing apparatus. Breathing air quality must meet the requirements of the OSHA respiratory protection standard (29CFR1910.134). This substance has poor warning properties. Where respirators are required, you must have a written program covering the basic requirements in the OSHA respirator standard. These include training, fit testing, medical approval, cleaning, maintenance, cartridge change schedules, etc. See 29CFR1910.134 for details.

**Skin Protection:**

Wear impervious protective clothing, including boots, gloves, lab coat, apron or coveralls, as appropriate, to prevent skin contact. Neoprene is a recommended material for personal protective equipment.

**Eye Protection:**

Use chemical safety goggles and/or a full face shield where splashing is possible. Maintain eye wash fountain and quick-drench facilities in work area.

---

## 9. Physical and Chemical Properties

**Appearance:**

Clear, colorless liquid.

**Odor:**

Chloroform-like odor.

**Solubility:**

Practically insoluble in water. Readily miscible in organic solvents.

**Specific Gravity:**

1.47 @ 20C/4C

**pH:**

No information found.

**% Volatiles by volume @ 21C (70F):**

100

**Boiling Point:**

87C (189F)

**Melting Point:**

-73C (-99F)

**Vapor Density (Air=1):**

4.5

**Vapor Pressure (mm Hg):**

57.8 @ 20C (68F)

**Evaporation Rate (BuAc=1):**

No information found.

---

## 10. Stability and Reactivity

**Stability:**



Stable under ordinary conditions of use and storage. Will slowly decompose to hydrochloric acid when exposed to light and moisture.

**Hazardous Decomposition Products:**

May produce carbon monoxide, carbon dioxide, hydrogen chloride and phosgene when heated to decomposition.

**Hazardous Polymerization:**

Will not occur.

**Incompatibilities:**

Strong caustics and alkalis, strong oxidizers, chemically active metals, such as barium, lithium, sodium, magnesium, titanium and beryllium, liquid oxygen.

**Conditions to Avoid:**

Heat, flame, ignition sources, light, moisture, incompatibles

## 11. Toxicological Information

**Toxicological Data:**

Trichloroethylene: Oral rat LD50: 5650 mg/kg; investigated as a tumorigen, mutagen, reproductive effector.

**Reproductive Toxicity:**

This material has been linked to mutagenic effects in humans.

-----\Cancer Lists\-----

Ingredient	---NTP Carcinogen---		IARC Category
	Known	Anticipated	
Trichloroethylene (79-01-6)	No	Yes	2A

## 12. Ecological Information

**Environmental Fate:**

When released into the soil, this material may leach into groundwater. When released into the soil, this material is expected to quickly evaporate. When released to water, this material is expected to quickly evaporate. This material has an experimentally-determined bioconcentration factor (BCF) of less than 100. This material is not expected to significantly bioaccumulate. When released into the air, this material may be moderately degraded by reaction with photochemically produced hydroxyl radicals. When released into the air, this material is expected to have a half-life between 1 and 10 days.

**Environmental Toxicity:**

The LC50/96-hour values for fish are between 10 and 100 mg/l. This material is expected to be slightly toxic to aquatic life.

## 13. Disposal Considerations

Whatever cannot be saved for recovery or recycling should be handled as hazardous waste and sent to a RCRA approved incinerator or disposed in a RCRA approved waste facility. Processing, use or contamination of this product may change the waste management options. State and local disposal regulations may differ from federal disposal regulations. Dispose of container and unused contents in accordance with federal, state and local requirements.

# 14. Transport Information

## Domestic (Land, D.O.T.)

Proper Shipping Name: TRICHLOROETHYLENE  
Hazard Class: 6.1  
UN/NA: UN1710  
Packing Group: III  
Information reported for product/size: 5GL

## International (Water, I.M.O.)

Proper Shipping Name: TRICHLOROETHYLENE  
Hazard Class: 6.1  
UN/NA: UN1710  
Packing Group: III  
Information reported for product/size: 5GL

## International (Air, I.C.A.O.)

Proper Shipping Name: TRICHLOROETHYLENE  
Hazard Class: 6.1  
UN/NA: UN1710  
Packing Group: III  
Information reported for product/size: 5GL

# 15. Regulatory Information

Ingredient	TSCA	EC	Japan	Australia
Trichloroethylene (79-01-6)	Yes	Yes	Yes	Yes

Ingredient	Korea	DSL	NDSL	Phil.
Trichloroethylene (79-01-6)	Yes	Yes	No	Yes

Ingredient	-SARA 302- RQ	TPQ	-SARA 313- List	Chemical Catg.
Trichloroethylene (79-01-6)	No	No	Yes	No

Ingredient	CERCLA	-RCRA- 261.33	-TSCA- 8 (d)
Trichloroethylene (79-01-6)	100	U228	No

Chemical Weapons Convention: No      TSCA 12(b): No      CDTA: No  
SARA 311/312: Acute: Yes      Chronic: Yes      Fire: No      Pressure: No  
Reactivity: No      (Pure / Liquid)

WARNING:

THIS PRODUCT CONTAINS A CHEMICAL(S) KNOWN TO THE STATE OF CALIFORNIA TO CAUSE CANCER.

**Australian Hazchem Code:** No information found.

**Poison Schedule:** S6

**WHMIS:**

This MSDS has been prepared according to the hazard criteria of the Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

## 6. Other Information

**NFPA Ratings:** Health: 2 Flammability: 1 Reactivity: 0

**Label Hazard Warning:**

WARNING! HARMFUL IF SWALLOWED OR INHALED. AFFECTS HEART, CENTRAL NERVOUS SYSTEM, LIVER AND KIDNEYS. CAUSES SEVERE SKIN IRRITATION. CAUSES IRRITATION TO EYES AND RESPIRATORY TRACT. SUSPECT CANCER HAZARD. MAY CAUSE CANCER. Risk of cancer depends on level and duration of exposure.

**Label Precautions:**

Do not get in eyes, on skin, or on clothing.

Do not breathe vapor.

Keep container closed.

Use only with adequate ventilation.

Wash thoroughly after handling.

Keep away from heat and flame.

**Label First Aid:**

If swallowed, induce vomiting immediately as directed by medical personnel. Never give anything by mouth to an unconscious person. If inhaled, remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. In case of contact, immediately flush eyes or skin with plenty of water for at least 15 minutes. Remove contaminated clothing and shoes. Wash clothing before reuse. In all cases call a physician. Note to physician: Do not administer adrenaline or epinephrine to a victim of chlorinated solvent poisoning.

**Product Use:**

Laboratory Reagent.

**Revision Information:**

MSDS Section(s) changed since last revision of document include: 8, 11.

**Disclaimer:**

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Prepared by: Strategic Services Division  
Phone Number: (314) 539-1600 (U.S.A.)

NOTE: CHEMTREC, CANUTEC and National Response Center emergency numbers to be used only in the event of chemical emergencies involving a spill, leak, fire, exposure or accident involving chemicals.

**MSDS**

**Material Safety Data Sheet**

From: Mallinckrodt Baker, Inc.  
222 Red School Lane  
Phillipsburg, NJ 08865



All non-emergency questions should be directed to Customer Service (1-800-882-2537) for assistance.

## ALCONOX(R)

MSDS Number: A2052 — Effective Date: 02/21/00

### 1. Product Identification

**Synonyms:** Proprietary blend of sodium linear alkylaryl sulfonate, alcohol sulfate, phosphates, and carbonates.

**CAS No.:** Not applicable.

**Molecular Weight:** Not applicable to mixtures.

**Chemical Formula:** Not applicable to mixtures.

**Product Codes:** A461

### 2. Composition/Information on Ingredients

Ingredient	CAS No	Percent	Hazardous
Alconox (R) proprietary detergent mixture	N/A	90 - 100%	Yes

### 3. Hazards Identification

#### Emergency Overview

**CAUTION! MAY BE HARMFUL IF SWALLOWED OR INHALED. MAY CAUSE IRRITATION TO EYES AND RESPIRATORY TRACT.**

**J.T. Baker SAF-T-DATA<sup>(tm)</sup> Ratings (Provided here for your convenience)**

Health Rating: 1 - Slight

Flammability Rating: 0 - None

Reactivity Rating: 1 - Slight

Contact Rating: 2 - Moderate

Lab Protective Equip: GOGGLES; LAB COAT

Storage Color Code: Orange (General Storage)

## Potential Health Effects

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### **Inhalation:**

May cause irritation to the respiratory tract. Symptoms may include coughing and shortness of breath.

### **Ingestion:**

May cause irritation to the gastrointestinal tract. Symptoms may include nausea, vomiting and diarrhea.

### **Skin Contact:**

No adverse effects expected.

### **Eye Contact:**

May cause irritation, redness and pain.

### **Chronic Exposure:**

No information found.

### **Aggravation of Pre-existing Conditions:**

No information found.

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## 4. First Aid Measures

### **Inhalation:**

Remove to fresh air. Get medical attention for any breathing difficulty.

### **Ingestion:**

If swallowed, DO NOT INDUCE VOMITING. Give large quantities of water. Never give anything by mouth to an unconscious person. Get medical attention.

### **Skin Contact:**

Wash exposed area with soap and water. Get medical advice if irritation develops.

### **Eye Contact:**

Immediately flush eyes with plenty of water for at least 15 minutes, lifting lower and upper eyelids occasionally. Get medical attention immediately.

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## 5. Fire Fighting Measures

### **Fire:**

Not expected to be a fire hazard.

### **Explosion:**

No information found.

### **Fire Extinguishing Media:**

Dry chemical, foam, water or carbon dioxide.

### **Special Information:**

In the event of a fire, wear full protective clothing and NIOSH-approved self-contained breathing apparatus with full facepiece operated in the pressure demand or other positive pressure mode.

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## 6. Accidental Release Measures

Ventilate area of leak or spill. Wear appropriate personal protective equipment as specified in Section 8.

Spills: Pick up and place in a suitable container for reclamation or disposal, using a method that does not generate dust. When mixed with water, material foams profusely. Small amounts of residue may be flushed to sewer with plenty of water.

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## 7. Handling and Storage

Keep in a tightly closed container, stored in a cool, dry, ventilated area. Protect against physical damage. Moisture may cause material to cake. Containers of this material may be hazardous when empty since they retain product residues (dust, solids); observe all warnings and precautions listed for

the product.

## 8. Exposure Controls/Personal Protection

### **Airborne Exposure Limits:**

- OSHA Permissible Exposure Limit (PEL):

15 mg/m<sup>3</sup> total dust, 5 mg/m<sup>3</sup> respirable fraction for nuisance dusts.

- ACGIH Threshold Limit Value (TLV):

10 mg/m<sup>3</sup> total dust containing no asbestos and < 1% crystalline silica for Particulates Not Otherwise Classified (PNOC).

### **Ventilation System:**

A system of local and/or general exhaust is recommended to keep employee exposures below the Airborne Exposure Limits. Local exhaust ventilation is generally preferred because it can control the emissions of the contaminant at its source, preventing dispersion of it into the general work area. Please refer to the ACGIH document, *Industrial Ventilation, A Manual of Recommended Practices*, most recent edition, for details.

### **Personal Respirators (NIOSH Approved):**

If the exposure limit is exceeded, a half-face dust/mist respirator may be worn for up to ten times the exposure limit or the maximum use concentration specified by the appropriate regulatory agency or respirator supplier, whichever is lowest. A full-face piece dust/mist respirator may be worn up to 50 times the exposure limit, or the maximum use concentration specified by the appropriate regulatory agency, or respirator supplier, whichever is lowest. For emergencies or instances where the exposure levels are not known, use a full-facepiece positive-pressure, air-supplied respirator. **WARNING:** Air-purifying respirators do not protect workers in oxygen-deficient atmospheres.

### **Skin Protection:**

Wear protective gloves and clean body-covering clothing.

### **Eye Protection:**

Use chemical safety goggles. Maintain eye wash fountain and quick-drench facilities in work area.

## 9. Physical and Chemical Properties

### **Appearance:**

White powder interspersed with cream colored flakes.

### **Odor:**

No information found.

### **Solubility:**

Moderate (1-10%)

### **Specific Gravity:**

No information found.

### **pH:**

No information found.

% Volatiles by volume @ 21C (70F):

0

### **Boiling Point:**

No information found.

### **Melting Point:**

No information found.

### **Vapor Density (Air=1):**

No information found.

### **Vapor Pressure (mm Hg):**

No information found.

### **Evaporation Rate (BuAc=1):**

No information found.

## 10. Stability and Reactivity

**Stability:**

Stable under ordinary conditions of use and storage.

**Hazardous Decomposition Products:**

Carbon dioxide and carbon monoxide may form when heated to decomposition.

**Hazardous Polymerization:**

Will not occur.

**Incompatibilities:**

No information found.

**Conditions to Avoid:**

No information found.

## 11. Toxicological Information

No LD50/LC50 information found relating to normal routes of occupational exposure.

-----\Cancer Lists\-----			
Ingredient	---NTP Carcinogen---		IARC Category
	Known	Anticipated	
Alconox(R) proprietary detergent mixture	No	No	None

## 12. Ecological Information

**Environmental Fate:**

This product is biodegradable.

**Environmental Toxicity:**

No information found.

## 13. Disposal Considerations

Whatever cannot be saved for recovery or recycling should be managed in an appropriate and approved waste disposal facility. Processing, use or contamination of this product may change the waste management options. State and local disposal regulations may differ from federal disposal regulations. Dispose of container and unused contents in accordance with federal, state and local requirements.

## 14. Transport Information

Not regulated.

## 15. Regulatory Information

-----\Chemical Inventory Status - Part 1\-----				
Ingredient	TSCA	EC	Japan	Australia
	Yes	No	No	No
Alconox(R) proprietary detergent mixture	Yes	No	No	No

-----\Chemical Inventory Status - Part 2\-----				
	--Canada--			

Ingredient	Korea	DSL	NDSL	Phil.
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Alconox(R) proprietary detergent mixture	No	No	Yes	No
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-----\Federal, State & International Regulations - Part 1\-----

Ingredient	-SARA 302-		-SARA 313-	
	RQ	TPQ	List	Chemical Catg.

Alconox(R) proprietary detergent mixture	No	No	No	No
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-----\Federal, State & International Regulations - Part 2\-----

Ingredient	CERCLA	-RCRA-	-TSCA-
		261.33	8 (d)

Alconox(R) proprietary detergent mixture	No	No	No
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Chemical Weapons Convention: No TSCA 12(b): No CDTA: No  
SARA 311/312: Acute: Yes Chronic: No Fire: No Pressure: No  
Reactivity: No (Pure / Solid)

**Australian Hazchem Code:** No information found.

**Poison Schedule:** No information found.

**WHMIS:**

This MSDS has been prepared according to the hazard criteria of the Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

## 16. Other Information

**NFPA Ratings:** Health: 0 Flammability: 0 Reactivity: 0

**Label Hazard Warning:**

CAUTION! MAY BE HARMFUL IF SWALLOWED OR INHALED. MAY CAUSE IRRITATION TO EYES AND RESPIRATORY TRACT.

**Label Precautions:**

Avoid contact with eyes.

Keep container closed.

Use with adequate ventilation.

Avoid breathing dust.

Wash thoroughly after handling.

**Label First Aid:**

If swallowed, DO NOT INDUCE VOMITING. Give large quantities of water. Never give anything by mouth to an unconscious person. If inhaled, remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. In case of eye contact, immediately flush eyes with plenty of water for at least 15 minutes. In all cases, get medical attention.

**Product Use:**

Laboratory Reagent.

**Revision Information:**

MSDS Section(s) changed since last revision of document include: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 15, 16.

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Prepared by: Strategic Services Division  
Phone Number: (314) 539-1600 (U.S.A.)

# MATERIAL SAFETY DATA SHEET

Schaeffer Mfg. Company  
102 Barton Street  
St. Louis, MO 63104

Emergency Telephone No.  
(314) 865-4105 or  
(800) 325-9962

## SECTION 1 - PRODUCT INFORMATION

Chemical Family: Petroleum Hydrocarbons

Trade Name: #137 Diesel Treat 2000

Formula: Proprietary Mixture.

## SECTION 2 - HAZARDOUS INGREDIENTS

COMPONENTS-CHEMICAL NAMES AND COMMON NAMES	CAS Number	%	Exposure Limits			
			TVL		PEL	
			ppm	mg/m <sup>3</sup>	ppm	mg/m <sup>3</sup>
Petroleum Distillate	68477-31-6	6-8		5		5
Naphthalene	91-20-3	.86	10	52	10	50
2-(Thiocyanomethylthio) Benzothiazole	21564-17-6	<1	NE		NE	
Heavy Aromatic Naphtha	64742-94-5	.2-1		5		5
2-Ethyl Hexyl Nitrate	27247-96-7	30-40	8			
Light Naphthenic Distillate	64742-53-6	25-30		5		5
Xylene	1330-20-7	.87	100	434	150	651

## Section 3 - PHYSICAL DATA

Boiling Point:	300° F/148.8° C	Specific Gravity:	.9083
Vapor Pressure (mm. Hg):	<.1	% Volatile:	<15
Vapor Density (Air = 1):	Not Determined	Evaporation Rate: (=1)	Not Determined
Solubility in Water:	Disperses	pH:	Not Applicable
Appearance and Odor: Red color, slight aromatic odor.			

## SECTION 4 - FIRE AND EXPLOSION HAZARD DATA

Flash Point (Method) ° F/° C: 75° F/23.89° C PMCC	Flammability Limits UEL & LEL ---Not Determined
Extinguishing Media: Carbon dioxide foam, dry chemical foam, sand, earth, waterfog.	
Special Fire Fighting Procedures: For fires involving this material, do not enter any enclosed or confined space without protective equipment including self-contained breathing apparatus. Cool exposed containers with waterspray. Avoid breathing fumes.	
Unusual Fire & Explosion Hazards: This product is flammable.	

## SECTION 5 - REACTIVITY HAZARD DATA

STABILITY <input checked="" type="checkbox"/> STABLE <input type="checkbox"/> UNSTABLE	Hazardous Decomposition <input type="checkbox"/> WILL <input checked="" type="checkbox"/> WILL NOT OCCUR
Conditions to Avoid: High heat, high energy ignition sources	
Incompatibility (Mat. to avoid): Strong oxidizing agents, amines, phenols, halogen compounds.	
Hazardous Decomposition Products: Oxides of carbon and nitrogen.	
Conditions to Avoid: None.	

## SECTION 6 - HEALTH HAZARD DATA

Threshold Limit Value and Sources: None established.
Acute Effects of Overexposure:
Ingestion: Harmful or fatal if swallowed.
Eye Contact: Liquid contact produces severe irritation to the eyes.
Skin Contact: Prolonged and repeated contact with the skin can cause redness or severe irritation.
Inhalation: Inhalation of vapors can cause headache, dizziness, nausea, or decreased blood pressure.
CHRONIC EFFECTS OF OVEREXPOSURE: None currently known.
Emergency and First Aid Procedures:
Swallowing: If a large amount of this material is swallowed give a large amount of water to drink. Do not induce vomiting. Seek medical attention immediately.
Skin: Wash skin thoroughly with soap and water. Launder contaminated clothing.
Inhalation: Remove victim to fresh air. If breathing has stopped start artificial respiration immediately.
Eyes: Flush eyes with clear, cool, clean water for 15 minutes. Seek medical attention immediately

## SECTION 7 - SPILL OR LEAK PROCEDURES

**Environmental Impact:** This material is not expected to present any environmental problems other than those associated with oil spills. If spilled into a watercourse, call the Coast Guard Toll Free No. 800-424-8802.

**Procedures To Be Taken If Material Is Released or Spilled:** Eliminate all sources of ignition. Absorb spills with absorbent clay. Ventilate confined spaces. Keep out of sewers and watercourses.

**Waste Disposal Method:** Dispose of at an approved waste or disposal site facility in accordance with all applicable federal, state and local laws and regulations.

## SECTION 8 - SPECIAL PROTECTION INFORMATION

**Respiratory Protection:** None required under ordinary conditions of use.

**Ventilation:** No special requirement under ordinary conditions of use and with adequate ventilation.

**Eye Protection:** Goggles or face shield.

**Protective Clothing:** Use air-supplied mask if used in confined space.

## SECTION 9 - SPECIAL PRECAUTIONS

**Precautions To Be Taken In Handling and Storage:** Do not store near heat, spark, flame or strong oxidizers. Keep containers closed when not in use.

**Special Comments:** Avoid breathing vapors. Avoid prolonged or repeated skin contact. Remove contaminated shoes and clothing. Throw away shoes. Launder clothing before reuse. Wash thoroughly with soap and water after use.

## SECTION 10 - ADDITIONAL HEALTH AND TOXICOLOGICAL DATA

HMIS & NFPA Ratings: Health = 2 Fire = 3 Reactivity = 0

Contaminated clothing should be disposed of properly and/or decontaminated before reuse. Under no circumstance should vomiting be induced. Vomiting can cause aspiration of the product into the lungs. If aspirated into the lungs, chemical pneumonia, which may cause death in spite of treatment with oxygen and antibiotics, may result.

Probable mucosal damage may contraindicate the use of gastric lavage. Measures against circulatory shock, respiratory depression and convulsion may be needed.

This product does not contain any levels of the chemicals that are listed as potential cancer causing agents as determined by the National Toxicology Program's Annual Reports, OSHA's Subpart Z list, the International Agency for Cancer Research's Monograph's or the State of California's Proposition 65 list.

For SARA Title III Information, see below.

### SARA TITLE III INFORMATION

Section 302/304 Extremely Hazardous Component  
None

Section 102(a) CERCLA Hazardous Substance

Component	CAS#	%	RQ (lbs.)	RQ (gals.)
Ethylbenzene	100-41-4	.02-.2	1000	66,138-661,376
Naphthalene	91-20-3	.86	100	1528
Xylene	1330-20-7	.87	1000	15,204

\*Product RQ for Stationary Sources Release Regulatory.

Title Section 311 Hazardous Categorization

Acute	Chronic	Fire	Pressure	Reactivity
X	X	X		

Section 313 Toxic Chemical

Component	CAS#	%
Ethylbenzene	100-41-4	.02-.2
Naphthalene	91-20-3	.86
Xylene	1330-20-7	.87

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